Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

|  | Part 1: | Identify | Yourself |
|--|---------|----------|----------|
|--|---------|----------|----------|

|   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case): |
|---|--|---|
| 1. Your full name   |  |   |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Jennifer First name Louise Middle name                             | First name  Middle name                       |
| Bring your picture identification to your meeting with the trustee.   | Kvamme Last name   | Last name                                     |
|   | Suffix (Sr., Jr., II, III)   | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you have used in the last 8 years  | First name   | First name                                    |
| Include your married or maiden names.   | Middle name  | Middle name                                   |
|   | Last name  | Last name                                     |
|   | First name   | First name                                    |
|   | Middle name  | Middle name                                   |
|   | Last name  | Last name                                     |
|   |  |   |
| 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)      | xxx - xx - <u>9</u> <u>2</u> <u>9</u> <u>2</u> OR <b>9</b> xx - xx | xxx - xx                                      |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Page 2 of 66 Document

Debtor 1

| Jennifer Louis | se Kvamme   |           | Case number (if known) | nown) |  |
|----------------|-------------|-----------|------------------------|-------|--|
| First Name     | Middle Name | Last Name |                        |       |  |

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in<br>the last 8 years | I have not used any business names or EINs.  Business name  | ☐ I have not used any business names or EINs.  Business name  |
|    | doing business as names  | Business name   | Business name   |
|    |  | EIN   | EIN   |
|    |  | EIN   | EIN   |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |
|    |  | 510 N. Dixon Avenue Number Street   | Number Street   |
|    |  | Dixon IL 61021 City State ZIP Code  | City State ZIP Code   |
|    |  | LEE County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                           | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number Street   | Number Street   |
|    |  | P.O. Box  | P.O. Box  |
|    |  | City State ZIP Code   | City State ZIP Code   |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 3 of 66

Debtor 1 Jennifer Louise Kvamme Case number (if known) Case number (if known)

| Pa  | art 2:          | Tell the Court Abou                                     | t Your B               | ankrup   | tcy Case   |                              |  |  |  |
|-----|-----------------|---|------------------------|--|--|------------------------------|--|--|--|
| 7.  | Bankr           | hapter of the<br>ruptcy Code you                        | Check or<br>for Banki  | ne. (For<br>ruptcy (F  | a brief description of each, s<br>form 2010)). Also, go to the | ee <i>Notic</i><br>top of pa | ce <i>Required by 11</i><br>age 1 and check th | U.S.C. § 342(b) for Individuals Filing appropriate box.  |  |
|     | are ch<br>under | noosing to file   |                        | oter 7   |  |                              |  |  |  |
|     |                 |   | ☐ Chap                 | oter 11  |  |                              |  |  |  |
|     |                 |   | ☐ Chap                 | oter 12  |  |                              |  |  |  |
|     |                 |   | ☐ Chap                 | oter 13  |  |                              |  |  |  |
| 8.  | How y           | you will pay the fee                                    | local<br>your<br>subn  | court for<br>self, you<br>nitting y  | or more details about how<br>u may pay with cash, cas          | v you m<br>hier's c          | nay pay. Typicall<br>heck, or money            | eck with the clerk's office in your<br>y, if you are paying the fee<br>order. If your attorney is<br>pay with a credit card or check |  |
|     |                 |   |                        |  | ay the fee in installment                                      |                              |  |  |  |
|     |                 |   | Appl                   | ication  | for Individuals to Pay The                                     | Filing                       | Fee in Installme                               | nts (Official Form 103A).  |  |
|     |                 |   | By la<br>less<br>pay t | <b>request that my fee be waived</b> (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is ess than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. |  |                              |  |  |  |
| 9.  |                 | you filed for   | ⊠ No                   |  |  |                              |  |  |  |
|     |                 | uptcy within the years?                                 | ☐ Yes.                 | District   |  | _ When                       |  | Case number  |  |
|     |                 |   |                        | 51   |  |                              | MM / DD / YYYY                                 |  |  |
|     |                 |   |                        | District   |  | _ When                       | MM / DD / YYYY                                 | Case number  |  |
|     |                 |   |                        | District   |  | _ When                       | MM / DD / YYYY                                 | Case number  |  |
|     |                 |   |                        |  |  |                              |  |  |  |
| 10. |                 | ny bankruptcy   | ĭ No                   |  |  |                              |  |  |  |
|     |                 | pending or being<br>by a spouse who is                  | ☐ Yes.                 | Debtor   |  |                              |  | Relationship to you  |  |
|     | not fil         | ling this case with<br>or by a business<br>er, or by an |                        | District   |  | _ When                       | MM / DD / YYYY                                 | Case number, if known  |  |
|     | umu             |   |                        | Debtor   |  |                              |  | Relationship to you  |  |
|     |                 |   |                        | District   |  | _ When                       |  | Case number, if known  |  |
|     |                 |   |                        |  |  |                              | MM / DD / YYYY                                 |  |  |
| 11. | Do yo<br>reside | ou rent your<br>ence?                                   | No.     Yes.           | ☐ No.  | ur landlord obtained an evice<br>Go to line 12.                |                              |  | ?<br>* Against You (Form 101A) and file it as  |  |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 4 of 66

Debtor 1 Jennifer Louise Kvamme Case number (if known) Case number (if known)

|  | Are you a sole proprietor  | ☒ No. Go to Part 4. |  |                     |                       |           |           |  |
|--|--|---------------------|--|---------------------|-----------------------|-----------|-----------|--|
|  | of any full- or part-time<br>business?   | ☐ Yes.              | ☐ Yes. Name and location of business   |                     |                       |           |           |  |
|  | A sole proprietorship is a   |                     |  |                     |                       |           |           |  |
| į  | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or   |                     | Name of business, if any   |                     |                       |           |           |  |
|  | LLC.   |                     | Number Street  |                     |                       |           |           |  |
| 9  | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.  |                     | City   |                     | State                 | ZIP Code  |           |  |
|  |  |                     | Oity   |                     | State                 | Zii Oode  |           |  |
|  |  |                     | Check the appropriate be   | ox to describe yo   | ur business:          |           |           |  |
|  |  |                     | ☐ Health Care Busines  | s (as defined in 1  | 1 U.S.C. § 101(27A))  |           |           |  |
|  |  |                     | ☐ Single Asset Real Es   | state (as defined i | n 11 U.S.C. § 101(51E | 3))       |           |  |
|  |  |                     | ☐ Stockbroker (as defin  | ned in 11 U.S.C.    | § 101(53A))           |           |           |  |
|  |  |                     | ☐ Commodity Broker (a  | as defined in 11 L  | I.S.C. § 101(6))      |           |           |  |
|  |  |                     | ☐ None of the above  |                     |                       |           |           |  |
|  | 11 U.S.C. § 101(51D).  |                     | I am filing under Chapter<br>the Bankruptcy Code.  I am filing under Chapter<br>Bankruptcy Code. |                     |                       |           |           |  |
| ar                                       | rt 4: Report if You Own  | or Have             | Any Hazardous Prop   | erty or Any Pr      | operty That Needs     | Immediate | Attention |  |
| 4. <b>[</b>                              | Do you own or have any   | or Have             | Any Hazardous Prop   | erty or Any Pr      | operty That Needs     | Immediate | Attention |  |
| ı. [                                     | Do you own or have any property that poses or is   | ☑ No                | Any Hazardous Prop  What is the hazard?  | erty or Any Pr      | operty That Needs     | Immediate | Attention |  |
| 4. [<br>6<br>6<br>1                      | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any  | ☑ No                | ·  | erty or Any Pr      | operty That Needs     | Immediate | Attention |  |
| 4. I<br>6<br>6<br>1<br>1                 | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?  | ☑ No                | ·  |                     |                       |           |           |  |
| 1. II<br>3<br>4<br>6<br>1<br>1<br>1<br>1 | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs  | ☑ No                | What is the hazard?  |                     |                       |           |           |  |
| 1. II<br>3<br>4<br>6<br>1<br>1<br>1<br>1 | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building | ☑ No                | What is the hazard?  | s needed, why is    |                       |           |           |  |
| 4. [<br>                                 | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building | ☑ No                | What is the hazard?  If immediate attention is   | s needed, why is    | it needed?            |           |           |  |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 5 of 66

Debtor 1 Jennifer Louise Kvamme

First Name

Middle Name

Last Name

Case number (if known)

#### Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to red | eive a | briefing | about |
|--------------------------|--------|----------|-------|
| credit counseling beca   | use of | :        |       |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of:                 |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Entered 02/19/18 11:24:32 Desc Main Case 18-80306 Doc 1 Filed 02/19/18 Document Page 6 of 66

Jennifer Louise Kvamme Debtor 1

Case number (if known)\_ Last Name

| Pa      | rt 6: Answer These Ques  | tions for Reporting Purposes  |  |  |   |  |  |  |
|---------|--|---|--|--|---|--|--|--|
| 16.     | What kind of debts do you have?  | 16a. <b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  |  |  |   |  |  |  |
|         |  | <ul><li>No. Go to line 16b.</li><li>Yes. Go to line 17.</li></ul>   |  |  |   |  |  |  |
|         | ots that you incurred to obtain ss or investment.                              |   |  |  |   |  |  |  |
|         |  | ☐ No. Go to line 16c. ☐ Yes. Go to line 17.   |  |  |   |  |  |  |
|         |  | 16c. State the type of debts you owe  | e that are not consumer de   | ebts or business of                      | debts.  |  |  |  |
| 17.     | Are you filing under Chapter 7?  | ☐ No. I am not filing under Chapte  | er 7. Go to line 18.   |  |   |  |  |  |
|         | Do you estimate that after any exempt property is                              | Yes. I am filing under Chapter 7. administrative expenses are   | Do you estimate that after<br>e paid that funds will be av           | r any exempt pro<br>railable to distribu | perty is excluded and te to unsecured creditors?  |  |  |  |
|         | excluded and administrative expenses   | ☑ No<br>□ Yes   |  |  |   |  |  |  |
|         | are paid that funds will be available for distribution to unsecured creditors? | □ Yes   |  |  |   |  |  |  |
| 18.     | How many creditors do you estimate that you                                    | <ul><li>▲ 1-49</li><li>➡ 50-99</li></ul>  | ☐ 1,000-5,000<br>☐ 5,001-10,000                                      |  | <b>2</b> 5,001-50,000   |  |  |  |
|         | owe?   | □ 100-199<br>□ 200-999  | 10,001-25,000  |  | ☐ S0,0001-100,0000☐ More than 100,000   |  |  |  |
| 19.     | How much do you estimate your assets to  | \$0-\$50,000<br>\$50,001-\$100,000  | \$1,000,001-\$10 millio<br>\$10,000,001-\$50 millio                  |  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion                                  |  |  |  |
|         | be worth?  | □ \$100,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million   | \$50,000,001-\$50 mill \$50,000,001-\$500 mill \$100,000,001-\$500 m | llion [                                  | ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion |  |  |  |
| 20.     | How much do you  | \$0-\$50,000  | \$1,000,001-\$10 millio  |  | \$500,000,001-\$1 billion   |  |  |  |
|         | estimate your liabilities to be?   | □ \$50,001-\$100,000<br>□ \$100,001-\$500,000   | \$10,000,001-\$50 milli<br>\$50,000,001-\$100 mil                    |  | □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion                          |  |  |  |
| Pa      | rt 7: Sign Below   | □ \$500,001-\$1 million   | □ \$100,000,001-\$500 m  | nillion                                  | ☐ More than \$50 billion  |  |  |  |
|         | <u> </u>   | I have examined this petition, and I d  | declare under penalty of pe  | erjury that the info                     | ormation provided is true and   |  |  |  |
| For you |  | correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |  |  |   |  |  |  |
|         |  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  |  |  |   |  |  |  |
|         |  | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  |  |  |   |  |  |  |
|         |  | I understand making a false statement, concealing property, or obtaining money or property by fraud in connewith a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  |  |  |   |  |  |  |
|         |  | x/Jennifer Louise Kvamme  | <b>×</b>   | ·  |   |  |  |  |
|         |  | Signature of Debtor 1   |  | Signature of De                          | btor 2  |  |  |  |
|         |  | Executed on <u>02/19/2018</u><br>MM / DD / YYYY   | <del></del>  | Executed on                              | M / DD /YYYY  |  |  |  |

## Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 7 of 66

Case number (if known)\_

Jennifer Louise Kvamme

Debtor 1

| For your attorney, if you are represented by one                               | I, the attorney for the debtor(s) named in this peti<br>to proceed under Chapter 7, 11, 12, or 13 of title<br>available under each chapter for which the perso<br>the notice required by 11 U.S.C. § 342(b) and, in | 11, United States Code, and is eligible. I also certify the | d have explained the relief at I have delivered to the debtor(s |  |
|--|---|---|---|--|
| you are not represented<br>y an attorney, you do not<br>eed to file this page. | knowledge after an inquiry that the information in  | the schedules filed with the                                | petition is incorrect.  |  |
| eed to me this page.   | s/Linda A. Giesen   | Date  | 02/19/2018  |  |
|  | Signature of Attorney for Debtor  |   | MM / DD /YYYY   |  |
|  | Linda A. Giesen   |   |   |  |
|  | Printed name  |   |   |  |
|  | Dixon & Giesen Law Offices  |   |   |  |
|  | Firm name   |   |   |  |
|  | 121 East First Street   |   |   |  |
|  | Number Street   |   |   |  |
|  | Dixon   | IL  | 61021   |  |
|  | City  | State   | ZIP Code  |  |
|  | Contact phone (815) 284-2288  | Email address   | lag@hsdixonlaw.com  |  |
|  | 56636   | IL  |   |  |
|  |   | IL.   |   |  |

| Fill in this information to identify your case and this filing:       |                        |                       |                     |  |  |  |
|---|------------------------|-----------------------|---------------------|--|--|--|
| Debtor 1  | Jennifer<br>First Name | Louise<br>Middle Name | Kvamme<br>Last Name |  |  |  |
| Debtor 2<br>(Spouse, if filing  | ) First Name           | Middle Name           | Last Name           |  |  |  |
| United States Bankruptcy Court for the: Northern District of Illinois |                        |                       |                     |  |  |  |
| Case number   |                        |                       |                     |  |  |  |
|   |                        |                       |                     |  |  |  |

#### Official Form 106A/B

### Schedule A/B: Property

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

| ) Ye        | o. Go to Part 2.<br>es. Where is the property?                         |  |  |   |
|-------------|--|--|--|---|
| 1.1.        | 510 N. Dixon Avenue Street address, if available, or other description | What is the property? Check all that apply.  ☑ Single-family home ☐ Duplex or multi-unit building  | Do not deduct secured claims or exemptions. Put<br>the amount of any secured claims on Schedule D:<br>Creditors Who Have Claims Secured by Property. |   |
|             | Street address, if available, of other description                     | <ul><li>Condominium or cooperative</li><li>Manufactured or mobile home</li></ul>   | Current value of the entire property? Current value of to portion you own?   |   |
|             |  | Land   | \$ 63,200.00   | \$ 63,200.00  |
|             | Dixon IL 61021 City State ZIP Code                                     | ☐ Investment property ☐ Timeshare ☐ Other  | Describe the nature of interest (such as fee the entireties, or a life   | simple, tenancy by  |
|             |  | Who has an interest in the property? Check one.  Debtor 1 only   | Fee Simple Ownership   |   |
|             | County   | □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another  Other information you wish to add about this its property identification number:   |  | mmunity property  |
| lf you      | anno an banca manua than ana liat bana.                                |  |  |   |
| •           | own or have more than one, list here:                                  | What is the property? Check all that apply.  Single-family home  | Do not deduct secured cla<br>the amount of any secure  | d claims on Schedule D:   |
| you<br>1.2. | Street address, if available, or other description                     | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home  |  | d claims on Schedule D:<br>ms Secured by Property.  |
| •           |  | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare   | the amount of any secured Creditors Who Have Clair  Current value of the   | d claims on Schedule D: ms Secured by Property.  Current value of th portion you own?  \$ |
| •           | Street address, if available, or other description                     | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one. | the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$   | d claims on Schedule D: ms Secured by Property.  Current value of th portion you own?  \$ |
| •           | Street address, if available, or other description                     | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other   | the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$   | d claims on Schedule Dans Secured by Property.  Current value of the portion you own?  \$ |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Page 9 of First Name Middle Name Last Name Pocument

| 1.3.    | Street address, if available  City  County        | State ZIP Code          | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: |  | d claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$  If your ownership simple, tenancy by e estate), if known. |
|---------|---|-------------------------|---|--|---|
|         |   |                         | II of your entries from Part 1, including any entries   |  | \$ <u>63,200.00</u>   |
| you own | that someone else drive , vans, trucks, tractors, | al or equitable interes | st in any vehicles, whether they are registered or re, also report it on Schedule G: Executory Contracts as, motorcycles  | •  |   |
| 3.1.    | Make:   | Kia<br>Amanti           | Who has an interest in the property? Check one.  Debtor 1 only  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain  | d claims on Schedule D:   |
|         | Year: Approximate mileage: Other information:     | 2007<br>136,000         | <ul> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>  | Current value of the entire property?  | Current value of the portion you own?   |
|         | Carol Information.                                |                         | ☐ Check if this is community property (see instructions)  | \$ 3,725.00  | \$ 3,725.00   |
| If you  | own or have more than                             | one, describe here:     |   |  |   |
| 3.2.    | Make:<br>Model:                                   |                         | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only  | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Clain | d claims on Schedule D:   |
|         | Year: Approximate mileage: Other information:     |                         | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  | Current value of the entire property?  | Current value of the portion you own?   |
|         | Other information:                                |                         | ☐ Check if this is community property (see instructions)  | \$   | \$  |
|         |   |                         |   |  |   |

| М                                       |  |  | Do not deduct secured cla<br>the amount of any secure   | d claime on Cahadula D.  |
|---|--|--|---|--|
|   | lodel:   | Debtor 1 only  | Creditors Who Have Clair  |  |
| Ye                                      | ear:   | Debtor 2 only  | Current value of the  | Current value of the   |
| Aı                                      | pproximate mileage:  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | entire property?  | portion you own?   |
|   | other information:   | At least one of the debtors and another  |   |  |
|   | mer montanon.  | Check if this is community property (see instructions)   | \$  | \$   |
| .4. M                                   | lake:  | Who has an interest in the property? Check one.  | Do not deduct secured cla   |  |
| М                                       | lodel:   | Debtor 1 only  | Creditors Who Have Clair  |  |
| Ye                                      | ear:   | Debtor 2 only  | Current value of the  | Current value of the   |
| Δι                                      | pproximate mileage:  | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?   |
|   |  | At least one of the debtors and another  |   |  |
|   | ther information:  | Check if this is community property (see instructions)   | \$  | \$   |
| ample<br>No                             | ·  | and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor  |   |  |
| No<br>Yes<br>1. M                       | ·  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured clathe amount of any secure Creditors Who Have Clair  | d claims on Schedule D:<br>ns Secured by Property.  Current value of the                     |
| No<br>No<br>Yes<br>1. M<br>M            | es: Boats, trailers, motors, personal lake: lodel: ear:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clair<br>Current value of the<br>entire property?   | d claims on Schedule D:<br>ms Secured by Property.  Current value of the<br>portion you own? |
| No Yes  1 M M Ye                        | es: Boats, trailers, motors, personal lake: lodel: ear: ther information:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured clathe amount of any secure Creditors Who Have Clair  | d claims on Schedule D:<br>ns Secured by Property.  Current value of the<br>portion you own? |
| No Yes  1. M  M  Ye  O  you ov          | es: Boats, trailers, motors, personal lake: lodel: ear:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured cla   | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$   |
| Xample No Yes  1. M M Ye O  you ov 2. M | es: Boats, trailers, motors, personal lake:  lodel: ear: where information:  who or have more than one, list here lake:          | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer  | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$   |
| you ov                                  | es: Boats, trailers, motors, personal lake:  lodel:  ear:  other information:  wh or have more than one, list here lake:  lodel: | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.   | Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer Creditors Who Have Clair                       | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$   |
| you ov                                  | es: Boats, trailers, motors, personal lake:  lodel:  ear:  who or have more than one, list here lake:  lodel:  ear:  lodel:      | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer  | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$   |
| you ov                                  | es: Boats, trailers, motors, personal lake:  lodel:  ear:  other information:  wh or have more than one, list here lake:  lodel: | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only                             | Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer Creditors Who Have Clair  Current value of the | d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$   |

### Part 3: Describe Your Personal and Household Items

| Do  | you own or have any le   | egal or equitable interest in any of the following items?   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|-----|--|---|--|
| 6.  | Household goods and f  | furnishings   |  |
|     | Examples: Major applian  | ces, furniture, linens, china, kitchenware  |  |
|     | □ No   |   |  |
|     | Yes. Describe  | Refrig,stove,couch,recliner,desk,bed,dresser, tables and other misc   | <u>\$500.00</u>  |
| 7.  | Electronics  |   |  |
|     | collections; el  | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games |  |
|     | ☐ No<br>☑ Yes. Describe  | Laptop,cell phone,Blu-ray player,Roku tablet,desktop computer,3 TV's  | \$300.00   |
| 8.  | Collectibles of value  |   |  |
|     |  | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles   |  |
|     | Yes. Describe  | Pyrex bakeware  | \$ <u>50.00</u>  |
| _   | Familians  | ad babbisa  |  |
| 9.  | Equipment for sports and an annual sports an annual sports and an annual sports and an annual sports an annual sports and an annual sports an annual sports and an annual sports an annual sports an annual sports and an annual sports an |   |  |
|     |  | egraphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments                                 |  |
|     | ⊠ No   |   |  |
|     | Yes. Describe  |   | \$   |
| 10. | Firearms   |   |  |
|     | Examples: Pistols, rifles,   | shotguns, ammunition, and related equipment   |  |
|     | ĭ No   |   |  |
|     | Yes. Describe  |   | \$   |
| 11. | Clothes  Examples: Everyday clot  No   | hes, furs, leather coats, designer wear, shoes, accessories   |  |
|     | Yes. Describe  | Misc everyday clothing and shoes  | \$ <u>150.00</u>   |
| 12. | gold, silver ☐ No  | elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |  |
|     | Yes. Describe  | Costume jewelry   | \$_30.00   |
| 13. | Non-farm animals   |   |  |
|     | Examples: Dogs, cats, bi   | irds, horses  |  |
|     | ☐ No   | 0 D D   |  |
|     | Yes. Describe  | 2 Rescue Dogs   | \$_0.00  |
| 14. | Any other personal and   | household items you did not already list, including any health aids you did not list  |  |
|     | ☑ No   |   |  |
|     | Yes. Give specific   |   | \$   |
| 15  | information  |   | 4 000 00   |
| 15. |  | all of your entries from Part 3, including any entries for pages you have attached imber here   | \$ <u>1,030.00</u>   |
|     |  |   |  |

| Part 4: Describe Your Financial Ass | ets |
|-------------------------------------|-----|
|-------------------------------------|-----|

| Do you own or have any l   | legal or equitable interest in a      | any of the following?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|---------------------------------------|--|---|
| 16. <b>Cash</b> <i>Examples:</i> Money you h   | nave in your wallet, in your hom      | e, in a safe deposit box, and on hand when you file your petition  |   |
| ☐ No<br>☑ Yes  |                                       | Cash:  | \$40.00   |
|  |                                       | nts; certificates of deposit; shares in credit unions, brokerage houses ultiple accounts with the same institution, list each. |   |
| No  Yes  | illiai ilistitutoris. Il you have ili | Institution name:  |   |
|  | 17.1. Checking account:               | Midland State Bank   | \$640.29  |
|  | 17.2. Checking account:               | Ally Bank  | \$11.53   |
|  | 17.3. Savings account:                | Ally Bank  | \$0.03  |
|  | 17.4. Savings account:                |  | \$  |
|  | 17.5. Certificates of deposit:        |  | \$  |
|  | 17.6. Other financial account:        |  | \$  |
|  | 17.7. Other financial account:        |  | \$  |
|  | 17.8. Other financial account:        |  | \$  |
|  | 17.9. Other financial account:        |  | \$  |
| 18. Bonds, mutual funds, Examples: Bond funds,  ☑ No ☐ Yes   | Institution or issuer name:           | erage firms, money market accounts   | \$  |
| 19. Non-publicly traded st<br>an LLC, partnership, a   |                                       | rated and unincorporated businesses, including an interest in  |   |
| No     No | Name of entity:                       | % of ownership:  |   |
| Yes. Give specific information about   |                                       | %  | \$  |
| them   |                                       | %<br>  | \$<br>\$  |
|  |                                       |  | Ψ   |
|  |                                       |  |   |

Case 18-80306 Louise Jennifer

Doc 1 Filed 02/19/18 Entered 02/13/10 \_\_\_\_ Kvammeocument Page 13 of Gnumber (if known)\_\_\_\_\_ Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main

20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☑ No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately.. Type of account: Institution name: 401(k) or similar plan: State University Retirement System \$5,859.20 Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No X Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_ Prepaid rent: Telephone: City of Dixon Water: \$100.00 Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No. ☐ Yes...... Issuer name and description:

| 24. | 26 U.S.C. §§ 530(b)(1), 529A(b                                | in an account in a qualified ABLE program, or under a qualified so, and 529(b)(1).                   | ate tuition program.    |   |
|-----|---|--|-------------------------|---|
|     | ĭ No  |  |                         |   |
|     | ☐ Yes   | Institution name and description. Separately file the records of any inte                            | rests.11 U.S.C. § 521(d | e):   |
|     |   |  |                         | r.  |
|     |   |  |                         | \$  |
|     |   |  |                         | \$  |
|     |   |  |                         | \$  |
| 25. | Trusts, equitable or future into exercisable for your benefit | erests in property (other than anything listed in line 1), and rights o                              | or powers               |   |
|     | ⊠ No  |  |                         |   |
|     | ☐ Yes. Give specific  |  |                         |   |
|     | information about them  |  |                         | \$  |
|     |   |  |                         |   |
| 26. |   | ks, trade secrets, and other intellectual property   |                         |   |
|     | •   | es, websites, proceeds from royalties and licensing agreements                                       |                         |   |
|     | ☑ No  |  |                         | _   |
|     | ☐ Yes. Give specific  |  |                         | •   |
|     | information about them  |  |                         | \$  |
|     | Lieuwana formakiana and ada                                   | an area and to tax office.   |                         |   |
| 27. | Licenses, franchises, and oth                                 | er general intangibles<br>clusive licenses, cooperative association holdings, liquor licenses, profe | secional licenses       |   |
|     |   | nusive licerises, cooperative association northings, liquor licerises, profe                         |                         |   |
|     | ☑ No  |  |                         |   |
|     | Yes. Give specific information about them                     |  |                         | \$  |
|     |   |  |                         |   |
| Мс  | ney or property owed to you?                                  |  |                         | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 20  | Tax refunds owed to you                                       |  |                         |   |
| 20. | No  |  |                         |   |
|     | Yes. Give specific information                                |  | ]                       |   |
|     | about them, including   |  | Federal:                | \$  |
|     | you already filed the re                                      |  | State:                  | \$  |
|     | and the tax years   |  | Local:                  | \$  |
|     |   |  | 1                       |   |
| 29. | Family support  |  |                         |   |
|     |   | m alimony, spousal support, child support, maintenance, divorce settler                              | nent, property settleme | nt  |
|     | ĭ No  |  |                         |   |
|     | ☐ Yes. Give specific information                              | on   |                         |   |
|     |   |  | Alimony:                | \$  |
|     |   |  | Maintenance:            | \$  |
|     |   |  | Support:                | \$  |
|     |   |  | Divorce settlement:     | \$  |
|     |   |  | Property settlement:    | \$  |
| 30  | Other amounts someone owe                                     | s vou  | -                       |   |
| -0. | Examples: Unpaid wages, disal                                 | pility insurance payments, disability benefits, sick pay, vacation pay, wo                           | orkers' compensation,   |   |
|     | •   | fits; unpaid loans you made to someone else  |                         |   |
|     | ĭ No  |  |                         |   |
|     | •   |  |                         | \$_   |

| 31. <b>Interests in insurance policies</b> <i>Examples:</i> Health, disability, or life ins                | urance; health savings account (HSA); cre  | edit, homeowner's, or renter's insuran            | ce  |
|--|--|---|---|
| □ No   |  |   |   |
| Yes. Name the insurance company of each policy and list its valu   |  | Beneficiary:                                      | Surrender or refund value:                  |
| , ,  | University of Illinois   | Self  | <u>\$452.00</u>                             |
|  |  |   |   |
|  |  |   |   |
| property because someone has died.  No   | st, expect proceeds from a life insurance  | policy, or are currently entitled to rece         | ive   |
| Yes. Give specific information   |  |   | \$  |
|  |  |   |   |
| <ul><li>33. Claims against third parties, whether Examples: Accidents, employment dis</li><li>No</li></ul> | er or not you have filed a lawsuit or mac<br>putes, insurance claims, or rights to sue | de a demand for payment                           |   |
| Yes. Describe each claim   |  |   |   |
|  |  |   | \$  |
| <ul><li>34. Other contingent and unliquidated of to set off claims</li><li>No</li></ul>                    | laims of every nature, including count   | erclaims of the debtor and rights                 |   |
| ☐ Yes. Describe each claim   |  |   |   |
|  |  |   | \$  |
|  |  |   |   |
| 35. Any financial assets you did not alre  | eady list  |   |   |
| <ul><li>☑ No</li><li>☑ Yes. Give specific information</li></ul>  |  |   |   |
| Tes. Give specific information   |  |   | <b>\$</b>                                   |
| 36. Add the dollar value of all of your en   | ntries from Part 4, including any entries  |   | <b>\$7,103.05</b>                           |
|  |  |   |   |
|  |  |   |   |
| Part 5: Describe Any Busines   | ss-Related Property You Own  | or Have an Interest In. List                      | any real estate in Part 1.                  |
| 37. Do you own or have any legal or equ  | uitable interest in any business-related   | property?   |   |
| No. Go to Part 6.  |  |   |   |
| Yes. Go to line 38.  |  |   |   |
|  |  |   | Current value of the portion you own?       |
|  |  |   | Do not deduct secured claims or exemptions. |
| 38. Accounts receivable or commission  | s you already earned   |   | or exemptions.                              |
| No   | s you already earned   |   |   |
| Yes. Describe  |  |   |   |
|  |  |   | \$  |
| 39. <b>Office equipment, furnishings, and</b> Examples: Business-related computers, sof                    | supplies<br>tware, modems, printers, copiers, fax machines                             | rugs telephones desks chairs electronic           | c devices                                   |
| No   | maio, moderno, printero, copiero, rax macilines  | , rago, roropriorios, uesto, orialis, efectiville | , 401,000                                   |
| Yes. Describe  |  |   | \$  |
|  |  |   |   |

Debtor 1

| 40. Machinery, fixtures, e  | quipment, supplies you use in business, and tools of your trade                  |                   |   |
|-----------------------------|--|-------------------|---|
| ☑ No                        |  |                   |   |
| ☐ Yes. Describe             |  |                   | \$  |
| L                           |  |                   |   |
| 44 Inventory                |  |                   |   |
| 41. Inventory               |  |                   | -   |
| Yes. Describe               |  |                   | \$  |
|                             |  |                   |   |
| 42. Interests in partnersh  | ins or joint ventures  |                   |   |
| ■ No                        | ips of joint ventures  |                   |   |
| Yes. Describe               | News of softs  | 0/ -f             |   |
|                             |  | % of ownership:   | •   |
|                             |  | %                 | \$<br>\$                                    |
|                             |  | %<br>%            | \$S   |
|                             |  | 76                | Ψ   |
| 43. Customer lists, mailin  | g lists, or other compilations   |                   |   |
| No                          |  |                   |   |
| Yes. Do your lists          | include personally identifiable information (as defined in 11 U.S.C. § 101(41A)  | ))?               |   |
| ĭ No                        |  |                   | 7   |
| ☐ Yes. Desc                 | ribe   |                   | \$  |
|                             |  |                   |   |
| 44. Any business-related    | property you did not already list  |                   |   |
| ☑ No                        |  |                   |   |
| Yes. Give specific          |  |                   | \$  |
| information                 |  |                   | \$  |
|                             |  |                   | \$  |
|                             |  |                   |   |
|                             |  |                   | \$  |
|                             |  |                   | \$  |
|                             |  |                   | \$  |
| 45. Add the dollar value of | of all of your entries from Part 5, including any entries for pages you have att | ached             | \$0.00                                      |
|                             | number here  |                   | \$0.00                                      |
|                             |  |                   |   |
|                             |  |                   |   |
|                             | ny Farm- and Commercial Fishing-Related Property You Own or Ha                   | ve an Interest In |   |
| If you own or               | have an interest in farmland, list it in Part 1.                                 |                   |   |
| 40 Da                       |  |                   |   |
| No. Go to Part 7.           | ny legal or equitable interest in any farm- or commercial fishing-related prop   | erty?             |   |
| Yes. Go to line 47.         |  |                   |   |
|                             |  |                   | Current value of the                        |
|                             |  |                   | portion you own?                            |
|                             |  |                   | Do not deduct secured claims or exemptions. |
| 47. Farm animals            |  |                   |   |
| Examples: Livestock, p      | oultry, farm-raised fish   |                   |   |
| ĭ No                        |  |                   |   |
| ☐ Yes                       |  |                   |   |
|                             |  |                   | \$  |
| L                           |  |                   |   |

| 48. Crops—either growing or harvested   |                         |                              |                    |
|---|-------------------------|------------------------------|--------------------|
| ☐ Yes. Give specific information  |                         |                              | \$                 |
| 49. Farm and fishing equipment, implements, machinery, fixtures  No  Yes  | , and tools of trade    |                              | 1                  |
|   |                         |                              | \$                 |
| 50. Farm and fishing supplies, chemicals, and feed  No  |                         |                              |                    |
| ☐ Yes   |                         |                              | \$                 |
| 51. Any farm- and commercial fishing-related property you did no  | t already list          |                              |                    |
| Yes. Give specific information  |                         |                              | \$                 |
| 52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here             |                         |                              | \$_0.00            |
|   |                         |                              |                    |
| Part 7: Describe All Property You Own or Have a   | n Interest in That      | You Did Not List Above       |                    |
| 53. Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership | st?                     |                              |                    |
| ☑ No ☐ Yes. Give specific   |                         |                              | \$                 |
| information   |                         |                              | \$                 |
|   |                         |                              | <b>\$</b>          |
| 54. Add the dollar value of all of your entries from Part 7. Write the  | at number here          | <b>→</b>                     | \$                 |
| Part 8: List the Totals of Each Part of this Form   |                         |                              |                    |
| 55. Part 1: Total real estate, line 2   |                         |                              | <u>\$63,200.00</u> |
| 56. Part 2: Total vehicles, line 5  | \$ <u>3,725.00</u>      | _                            |                    |
| 57. Part 3: Total personal and household items, line 15   | \$ <u>1,030.00</u>      | _                            |                    |
| 58. Part 4: Total financial assets, line 36   | \$ <u>7,103.05</u>      | _                            |                    |
| 59. Part 5: Total business-related property, line 45  | \$ <u>0.00</u>          | _                            |                    |
| 60. Part 6: Total farm- and fishing-related property, line 52   | \$0.00                  | _                            |                    |
| 61. Part 7: Total other property not listed, line 54  | <b>+</b> \$ <u>0.00</u> | _                            |                    |
| 62. <b>Total personal property.</b> Add lines 56 through 61   | \$ <u>11,858.05</u>     | Copy personal property total | +\$11,858.05       |
| 63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62   |                         |                              | \$75,058.05        |

| Fill in this information to identify your case:                       |            |             |           |  |  |  |  |
|---|------------|-------------|-----------|--|--|--|--|
| Debtor 1  | Jennifer   | Louise      | Kvamme    |  |  |  |  |
|   | First Name | Middle Name | Last Name |  |  |  |  |
| Debtor 2  |            |             |           |  |  |  |  |
| (Spouse, if filing)   | First Name | Middle Name | Last Name |  |  |  |  |
| United States Bankruptcy Court for the: Northern District of Illinois |            |             |           |  |  |  |  |
| Case number(If known)   |            |             |           |  |  |  |  |

## ☐ Check if this is an amended filing

#### Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa    | Part 1: Identify the Property You Claim as Exempt   |   |                                      |  |                                    |  |  |  |
|-------|---|---|--------------------------------------|--|------------------------------------|--|--|--|
| 1.    | <ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.</li> <li>You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)</li> <li>You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)</li> </ol> |   |                                      |  |                                    |  |  |  |
| 2.    | For any propert   | ty you list on <i>Schedule A/B</i> th                   | nat you claim as exemp               | ot, fill in the information below.                                   |                                    |  |  |  |
|       |   | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim                                    | Specific laws that allow exemption |  |  |  |
|       |   |   | Copy the value from Schedule A/B     | Check only one box for each exemption.                               |                                    |  |  |  |
|       | Brief description:  | 510 N. Dixon Avenue                                     | \$ <u>63,200.00</u>                  | <b>∑</b> \$ <u>15,000.00</u>   | 735 ILCS 5/12-901                  |  |  |  |
|       | Line from Schedule A/B:   | 1.1   |                                      | ☐ 100% of fair market value, up to<br>any applicable statutory limit |                                    |  |  |  |
|       | Brief description:  | Kia Amanti  | \$ <u>3,725.00</u>                   | <b>∑</b> \$ _2,400.00  | 735 ILCS 5/12-1001(c)              |  |  |  |
|       | Line from Schedule A/B:   | 3.1   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit    |                                    |  |  |  |
|       | Brief description:  | See Attachment 1  | \$_500.00                            | × \$_500.00  | 735 ILCS 5/12-1001(b)              |  |  |  |
|       | Line from Schedule A/B:   | 6   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit    |                                    |  |  |  |
| 3.    | •   | ng a homestead exemption of                             |                                      |  |                                    |  |  |  |
|       | ` ,   | stment on 4/01/19 and every 3                           | years after that for case:           | s filed on or after the date of adjustment.)                         |                                    |  |  |  |
|       | ☑ No  | Loguiro the property severed                            | by the exemption within              | 1 215 days before you filed this case?                               |                                    |  |  |  |
|       | ☐ No  | acquire the property covered                            | oy the exemption within              | 1,215 days before you filed this case?                               |                                    |  |  |  |
| □ Yes |   |   |                                      |  |                                    |  |  |  |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main

Jennifer Louise Kvamme

Last Name

Document Page 19 of 66 number (if known)\_\_\_\_\_

Part 2:

Debtor 1

Additional Page

|                            | on of the property and line<br>A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim   | Specific laws that allow exemption |
|----------------------------|---|--------------------------------------|---|------------------------------------|
|                            |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption   |                                    |
| Brief description:         | See Attachment 2  | \$_300.00                            | <b>3</b> \$ 300.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    | 7   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | Pyrex bakeware  | \$_50.00                             | × \$ 50.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    | 8   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | See Attachment 3  | \$_150.00                            | <b>■</b> \$ <u>150.00</u>   | 735 ILCS 5/12-1001(a)              |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | Costume jewelry   | \$_30.00                             | <u>×</u> \$ <u>30.00</u>  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | Cash on hand  | \$ <u>40.00</u>                      | × \$ 40.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value, up to any applicable statutory limit  ☐ 100% of fair market value  ☐ 100% |                                    |
| Brief description:         | Midland Bank  | \$ <u>640.29</u>                     | <b>■</b> \$ 640.29  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    | <u>17.1</u>   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | See Attachment 4  | \$_11.53                             | <b>∑</b> \$ 11.53   | 735 ILCS 5/12-1001(b)              |
| Line from<br>Schedule A/B: | 17.2  |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | See Attachment 5  | \$ <u>5,859.20</u>                   | \$ 5,859.20   | 735 ILCS 5/12-704                  |
| Line from Schedule A/B:    | 21  |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         | See Attachment 6  | \$ <u>452.00</u>                     | <b>△</b> \$ <u>452.00</u>   | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         |   | \$                                   | <b>\$</b>   |                                    |
| Line from<br>Schedule A/B: |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         |   | \$                                   | <b>-</b> \$   |                                    |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |
| Brief description:         |   | \$                                   | <b>\$</b>   |                                    |
| Line from Schedule A/B:    |   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit   |                                    |

# Attachment Debtor: Jennifer Louise Kvamme Case No:

Attachment 1

Refrig, stove, couch, recliner, desk, bed, dresser, tables and other misc

Attachment 2

Laptop, cell phone, Blu-ray player, Roku tablet, desktop computer, 3 TV's

Attachment 3

Misc everyday clothing and shoes

Attachment 4

Checking Account with Ally Bank

Attachment 5

Pension Plan with State University Retirement System

Attachment 6

Insurance policy on Self with University of Illinois

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 21 of 66

| Fill in this in               | formation to identify     | your case:     |                 |  |
|-------------------------------|---------------------------|----------------|-----------------|--|
| Debtor 1 Jennifer Louise Kvam |                           | amme           |                 |  |
|                               | First Name                | Middle Name    | Last Name       |  |
| Debtor 2                      |                           |                |                 |  |
| (Spouse, if filing)           | First Name                | Middle Name    | Last Name       |  |
| United States E               | Sankruptcy Court for the: | Northern Distr | ict of Illinois |  |
| Case number (If known)        |                           |                |                 |  |

☐ Check if this is an amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

| <ol> <li>Do any creditors have claims secured by your property?</li> <li>No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.</li> </ol> |  |
|---|--|
| Yes. Fill in all of the information below.  |  |

| List All Secured Claims  |  |   |  |                                   |
|--|--|---|--|-----------------------------------|
| for each claim. If more than one creditor h As much as possible, list the claims in alph   | nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.   | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| Huntington National Bank   | Describe the property that secures the claim:  | \$4,000.00  | \$ <u>3,725.00</u>                                     | <u>\$</u> 275.00                  |
| Creditor's Name  2361 Morse Road  Number Street  | Kia Amanti   |   |  |                                   |
| PO Box 182519  | As of the date you file, the claim is: Check all that apply.   |   |  |                                   |
| Columbus OH 43229 City State ZIP Code  | ☐ Contingent ☐ Unliquidated ☐ Disputed   |   |  |                                   |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.  |   |  |                                   |
| <ul> <li>☑ Debtor 1 only</li> <li>☑ Debtor 2 only</li> <li>☑ Debtor 1 and Debtor 2 only</li> <li>☑ At least one of the debtors and another</li> <li>☑ Check if this claim relates to a community debt</li> </ul>         | <ul> <li>An agreement you made (such as mortgage or secured car loan)</li> <li>Statutory lien (such as tax lien, mechanic's lien)</li> <li>Judgment lien from a lawsuit</li> <li>Other (including a right to offset)</li> </ul>    | -   |  |                                   |
| Date debt was incurred October 2015  | Last 4 digits of account number 4 3 6 5  |   |  |                                   |
| PHH Mortgage   | Describe the property that secures the claim:  | \$ <u>54,755.00</u>   | \$ <u>63,200.00</u>                                    | \$                                |
| Creditor's Name PO Box 542 Number Street   | 510 N. Dixon Avenue  |   |  |                                   |
| Mt. Laurel NJ 08054  | As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  |   |  |                                   |
| City State ZIP Code  | ☐ Disputed   |   |  |                                   |
| Who owes the debt? Check one.  | Disputed  Nature of lien. Check all that apply.  |   |  |                                   |
| Who owes the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt                                  | Nature of lien. Check all that apply.  ☑ An agreement you made (such as mortgage or secured car loan)  ☑ Statutory lien (such as tax lien, mechanic's lien)  ☑ Judgment lien from a lawsuit  ☑ Other (including a right to offset) | -   |  |                                   |
| Who owes the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Date debt was incurred June 2007 | Nature of lien. Check all that apply.  ☑ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit  | -<br>\$ 58,755.00   |  |                                   |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Fill in this information to identify your case: Jennifer Louise Kvamme Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. X Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim Priority** Nonpriority amount amount 2.1 \$ 50.00 \$50.00 \$ 0.00 Internal Revenue Service Last 4 digits of account number 9 2 9 2 Priority Creditor's Name 1/2017 When was the debt incurred? Department of Treasuary As of the date you file, the claim is: Check all that apply. Kansas City MO 64999 Contingent ZIP Code ■ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify No ☐ Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations ☐ Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify

☐ No☐ Yes

| Gasaet8    | <del>.08133</del> 96vam1718 | c 1       | Filed 02/19/18 | Entered 02/19/18 11:24:32<br>Page 23 of 66 | Desc Main |
|------------|-----------------------------|-----------|----------------|--|-----------|
| First Name | Middle Name                 | Last Name | Document       | Page 23 of 66                              |           |

|     | LIST AIR OF TOUR HONE RICHTED OF SCOULCE CHAINS  |   |                        |
|-----|--|---|------------------------|
|     | Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the Yes  |   |                        |
|     | List all of your nonpriority unsecured claims in the alphabetical or priority unsecured claim, list the creditor separately for each claim. For included in Part 1. If more than one creditor holds a particular claim, list fill out the Continuation Page of Part 2. | each claim listed, identify what type of claim it is. Do not list c                                     | laims already          |
|     |  |   | Total claim            |
|     |  |   | rotar olalili          |
| l.1 | Barclaycard  | Last 4 digits of account number 1 7 8 5   | 2,246.87               |
|     | Nonpriority Creditor's Name  | When was the debt incurred? September 2016  | 2,240.07               |
|     | Card Services PO Box 60517   | when was the debt incurred? <u>Coptember</u> 2010   |                        |
|     | Number Street  |   |                        |
|     | City of Industry CA 91716-0517   | As of the date you file, the claim is: Check all that apply.  |                        |
|     | City State ZIP Code  | As of the date you me, the claim is. Check all that apply.  |                        |
|     |  | ☐ Contingent  |                        |
|     | Who incurred the debt? Check one.  | ☐ Unliquidated  |                        |
|     | □ Debtor 1 only  | ☐ Disputed  |                        |
|     | Debtor 2 only  |   |                        |
|     | ☐ Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |                        |
|     | At least one of the debtors and another  | ☐ Student loans   |                        |
|     | ☐ Check if this claim is for a community debt  | Obligations arising out of a separation agreement or divorce  |                        |
|     | ·  | that you did not report as priority claims  |                        |
|     | Is the claim subject to offset?  | Debts to pension or profit-sharing plans, and other similar debts                                       |                        |
|     | ☑ No   | Other. Specify Credit Card Charges  |                        |
|     | ☐ Yes  |   |                        |
| 1.2 | 0  | Last 4 digits of account number 5 7 7 1   | 3,030.00               |
|     | Capital One Nonpriority Creditor's Name  | When was the debt incurred? January 2004  | ,                      |
|     |  | which was the dest mounted.   |                        |
|     | PO Box 30285 Number Street   |   |                        |
|     | Salt Lake City UT 84130  | As of the date you file, the claim is: Check all that apply.  |                        |
|     | City State ZIP Code  |   |                        |
|     | ·  | ☐ Contingent ☐ Unliquidated   |                        |
|     | Who incurred the debt? Check one.  | ☐ Disputed  |                        |
|     | Debtor 1 only  | Disputed  |                        |
|     | Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |                        |
|     | Debtor 1 and Debtor 2 only   |   |                        |
|     | At least one of the debtors and another  | Student loans   |                        |
|     | ☐ Check if this claim is for a community debt  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |                        |
|     | Is the claim subject to offset?  | Debts to pension or profit-sharing plans, and other similar debts                                       |                        |
|     | No   | Other Specify Credit Card Charges   |                        |
|     | ☐ Yes  |   |                        |
|     |  |   |                        |
| 1.3 | Capital One Bank   | Last 4 digits of account number 7 3 7 6   | <sub>\$</sub> 4,577.36 |
|     | Nonpriority Creditor's Name  | When was the debt incurred? November 2012   | Ψ                      |
|     | PO Box 6492  |   |                        |
|     | Number Street  |   |                        |
|     | Carol Stream         IL         60197-6492           City         State         ZIP Code   | As of the date you file, the claim is: Check all that apply.  |                        |
|     | ,  | Contingent  |                        |
|     | Who incurred the debt? Check one.  | ☐ Unliquidated  |                        |
|     | ☑ Debtor 1 only  | Disputed  |                        |
|     | Debtor 2 only  | •   |                        |
|     | Debtor 1 and Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |                        |
|     | At least one of the debtors and another  | ☐ Student loans   |                        |
|     | ☐ Check if this claim is for a community debt  | Obligations arising out of a separation agreement or divorce  |                        |
|     | ·  | that you did not report as priority claims  |                        |
|     | Is the claim subject to offset?  No  | Debts to pension or profit-sharing plans, and other similar debts                                       |                        |
|     | ☐ Yes  | Other. Specify Credit Card Charges  |                        |
|     |  |   |                        |
|     |  |   |                        |

### Gasaet 8 280 30 6 van Page 1 Filed 02/19/18

Entered 02/19/18 11:24:32 Desc Main Page 24 of 66

Last Name Document

| Dari V |    |   |
|--------|----|---|
|        |    |   |
|        | Га | ~ |

#### Your NONPRIORITY Unsecured Claims —Continuation Page

| As of the date you file, the claim is: Check all that apple of NonPriority unsecured claim:    Carecredit/Synchrony Bank   | vorce that         |
|--|--------------------|
| PO Box 960061  Number Street  Orlando FL 32896-0061  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  When was the debt incurred?  As of the date you file, the claim is: Check all that apple Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or diversity you did not report as priority claims  | vorce that         |
| Orlando FL 32896-0061 City State ZIP Code Contingent Unliquidated Unliquidated Unliquidated Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  As of the date you file, the claim is: Check all that apple apple to the   | vorce that         |
| City  State  ZIP Code  Contingent  Unliquidated  Unliquidated  Disputed  Disputed  Type of NONPRIORITY unsecured claim:  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt   |                    |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or diversity you did not report as priority claims   |                    |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt   |                    |
| At least one of the debtors and another  Obligations arising out of a separation agreement or diversity debt  Check if this claim is for a community debt  you did not report as priority claims   |                    |
| ☐ Check if this claim is for a community debt you did not report as priority claims  |                    |
| Debts to papaign or profit sharing plans, and other simi   | ilar debts         |
| Is the claim subject to offset?  Is no  Yes  |                    |
| Discover  Last 4 digits of account number 4 6 1 4  | \$ <u>1,810.49</u> |
| Nonpriority Creditor's Name  When was the debt incurred?  December 201:  | 5                  |
| PO Box 6103  | 3                  |
| Number Street Carol Stream II 60197-6103  As of the date you file, the claim is: Check all that applied the claim is: Check all the claim i | ıly.               |
| City State ZIP Code Contingent   |                    |
| Who incurred the debt? Check one.  |                    |
| who incurred the debt? Check one.  Disputed  Disputed  |                    |
| ☐ Debtor 2 only  Type of NONPRIORITY unsecured claim:  |                    |
| Debtor 1 and Debtor 2 only   |                    |
| ☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or div   | vorce that         |
| □ Check if this claim is for a community debt  you did not report as priority claims □ Debts to pension or profit-sharing plans, and other simi  | ilar debte         |
| Is the claim subject to offset?  | iai debis          |
| ☑ No ☐ Yes   |                    |
| 4.6   Midas/Synchrony Car Care Last 4 digits of account number 0 2 7 9   | \$ <u>2,143.43</u> |
| Nonpriority Creditor's Name PO Box 960061  When was the debt incurred?  August 2014  |                    |
| Number Street  As of the date you file, the claim is: Check all that applied   | olv.               |
| Orlando FL 32896-0061  City State ZIP Code Contingent  | .,.                |
| Unliquidated   |                    |
| Who incurred the debt? Check one.  |                    |
| Debtor 1 only  |                    |
| ☐ Debtor 2 only  Type of <b>NONPRIORITY</b> unsecured claim:   |                    |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Obligations spiking suit of a constation account and its  |                    |
| Obligations arising out of a separation agreement or div   | vorce that         |
| Debts to pension or profit-sharing plans, and other simi   | ilar debts         |
| Is the claim subject to offset?  ☑ No ☐ Yes  |                    |

#### Gasael & 2000 (ampac 1 Filed 02/19/18 Last Name Document

Entered 02/19/18 11:24:32 Desc Main Page 25 of 66

Part 2:

#### Your NONPRIORITY Unsecured Claims —Continuation Page

| After listing any entries on this page, number them beginning with             | 4.5, followed by 4.6, and so forth.   | Total claim          |
|--|---|----------------------|
| Navient  | Last 4 digits of account number 6 7 0 0   | \$ <u>150,377.00</u> |
| Nonpriority Creditor's Name PO Box 9533  | When was the debt incurred?   |                      |
| Number Street Wilkes-Barre PA 18773  | As of the date you file, the claim is: Check all that apply.  |                      |
| City State ZIP Code  | Contingent Unliquidated   |                      |
| Who incurred the debt? Check one.  | ☐ Disputed  |                      |
| ☐ Debtor 1 only ☐ Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |                      |
| ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another          | Student loans   |                      |
| ☐ Check if this claim is for a community debt                                  | <ul> <li>Obligations arising out of a separation agreement or divorce that<br/>you did not report as priority claims</li> </ul>       |                      |
| Is the claim subject to offset?  | ☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify   |                      |
| ☑ No<br>□ Yes  |   |                      |
| Old Navy/Synchrony Bank  | Last 4 digits of account number 3 3 2 2   | <u>\$ 62.76</u>      |
| Nonpriority Creditor's Name PO Box 530942                                      | When was the debt incurred? October 2015  |                      |
| Number Street Atlanta GA 30353-0942  | As of the date you file, the claim is: Check all that apply.  |                      |
| City State ZIP Code  | Contingent  |                      |
| Who incurred the debt? Check one.  | ☐ Unliquidated ☐ Disputed   |                      |
| Debtor 1 only  |   |                      |
| Debtor 2 only Debtor 1 and Debtor 2 only                                       | Type of <b>NONPRIORITY</b> unsecured claim:  Student loans  |                      |
| ☐ At least one of the debtors and another                                      | <ul> <li>Obligations arising out of a separation agreement or divorce that<br/>you did not report as priority claims</li> </ul>       |                      |
| ☐ Check if this claim is for a community debt  Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card Charges                                 |                      |
| ☑ No ☐ Yes   | Other. Specify Cleuit Card Charges  |                      |
| I.9  | Last 4 digits of account number 1 4 4 0   | \$ <u>2,780.65</u>   |
| PayPal Credit Nonpriority Creditor's Name                                      |   |                      |
| PO Box 105658<br>Number Street   | When was the debt incurred?   |                      |
| Atlanta GA 30348-5658  | As of the date you file, the claim is: Check all that apply.  |                      |
| City State ZIP Code  | ☐ Contingent☐ Unliquidated  |                      |
| Who incurred the debt? Check one.  | ☐ Disputed  |                      |
| Debtor 1 only Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |                      |
| ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another          | ☐ Student loans   |                      |
| ☐ Check if this claim is for a community debt                                  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                               |                      |
| Is the claim subject to offset?  | <ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify Credit Card Charges</li> </ul> |                      |
| ☑ No<br>☐ Yes  |   |                      |

Gassed & 280306 vam Pac 1 Filed 02/19/18 Last Name Document

Entered 02/19/18 11:24:32 Desc Main Page 26 of 66

Part 2:

Your NONPRIORITY Unsecured Claims —Continuation Page

| fter listing any entries on this page, number them begin | ning with 4.5, followed by 4.6, and so forth.   | Total claim        |
|--|---|--------------------|
| Synchrony Bank/Amazon Nonpriority Creditor's Name        | Last 4 digits of account number 2 3 3 4   | \$ <u>1,020.52</u> |
| PO Box 960013  | When was the debt incurred? May 2013  |                    |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |                    |
| Orlando FL 32896-0                                       |   |                    |
| Who incurred the debt? Check one.                        | ☐ Unliquidated ☐ Disputed   |                    |
| Debtor 1 only  | Type of NONDDIODITY unaccoursed eleient   |                    |
| ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only             | Type of <b>NONPRIORITY</b> unsecured claim:   |                    |
| At least one of the debtors and another                  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul> |                    |
| ☐ Check if this claim is for a community debt            | you did not report as priority claims   |                    |
| ·  | Debts to pension or profit-sharing plans, and other similar debts   |                    |
| Is the claim subject to offset?  ☑ No ☐ Yes              | ☑ Other. Specify Credit Card Charges  |                    |
| 11   | Last 4 digits of account number   | \$                 |
| Nonpriority Creditor's Name                              | When was the debt incurred?   |                    |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |                    |
| City State ZIP Coo                                       | — Contingent  |                    |
| Who incurred the debt? Check one.                        | Unliquidated  |                    |
| Debtor 1 only  | ☐ Disputed  |                    |
| Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |                    |
| Debtor 1 and Debtor 2 only                               | Student loans   |                    |
| ☐ At least one of the debtors and another                | Obligations arising out of a separation agreement or divorce that   |                    |
| ☐ Check if this claim is for a community debt            | you did not report as priority claims   |                    |
| Is the claim subject to offset?                          | ☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify                       |                    |
| □ No □ Yes   | Guler. Specify  |                    |
| 12   | Last 4 digits of account number   | \$                 |
| Nonpriority Creditor's Name                              | When was the debt incurred?   |                    |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |                    |
| City State ZIP Coc                                       | _ ************************************  |                    |
| Who incurred the debt? Check one.                        | ☐ Unliquidated ☐ Disputed   |                    |
| Debtor 1 only  | □ Disputed  |                    |
| Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |                    |
| Debtor 1 and Debtor 2 only                               | Student loans   |                    |
| ☐ At least one of the debtors and another                | Obligations arising out of a separation agreement or divorce that   |                    |
| ☐ Check if this claim is for a community debt            | you did not report as priority claims   |                    |
| Is the claim subject to offset?                          | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify                      |                    |
| □ No □ Yes   | Guier. Specify  |                    |

Part 3:

# Gessified 8280806vamPac 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main First Name Middle Name Document Page 27 of 66

List Others to Be Notified About a Debt That You Already Listed

| Capital One Bank USA NA                            | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
|--|---|
| PO Box 30281                                       | Line $4.3$ of (Check one): $\square$ Part 1: Creditors with Priority Unsecured Claims       |
| Number Street                                      | Part 2: Creditors with Nonpriority Unsecured Claims   |
|  | Last 4 digits of account number 7 3 7 6   |
| Salt Lake City, UT 84130                           | Last 4 digits of account number 1 3 1 0   |
| City State ZIP Code                                |   |
| SYNCB/Care Credit                                  | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| PO Box 965036                                      | Line <u>4.4</u> of ( <i>Check one</i> ): ☐ Part 1: Creditors with Priority Unsecured Claims |
| Number Street                                      | Part 2: Creditors with Nonpriority Unsecured  |
|  | Claims  |
| Orlando, Florida 32896-5036<br>City State ZIP Code | Last 4 digits of account number 6 8 8 3   |
| Discover Financial Services                        | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| PO Box 15316                                       | Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims                 |
| lumber Street                                      | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Wilmington, DE 19850                               |   |
| State ZIP Code                                     | Last 4 digits of account number 4 6 1 4   |
| SYNCB/Car Care Bruneel                             | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| PO Box 965001                                      | Line <u>4.6</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims          |
| lumber Street                                      | ☑ Part 2: Creditors with Nonpriority Unsecured Claims                                       |
| Orlando, FL 32896                                  | Last 4 digits of account number <u>0 2 7 9</u>  |
| Navient  | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| Name   | Line 17 of (Object and) D. Bort 4. On the month Direct Management Object                    |
| PO Box 9500<br>Number Street                       | Line <u>4.7</u> of ( <i>Check one</i> ): Part 1: Creditors with Priority Unsecured Claims   |
|  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Wilkes Barre, PA 18773                             | Last 4 digits of account number 6 7 0 0   |
| State ZIP Code                                     | Last 4 digits of account number 6 1 0 0   |
| Navient  | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| Name   | Line <u>4.7</u> of ( <i>Check one</i> ): ☐ Part 1: Creditors with Priority Unsecured Claims |
| 123 Justison Street  Jumber Street                 | Part 2: Creditors with Nonpriority Unsecured  |
| 3rd Floor  | Claims  |
| Wilmington, Delaware 19801                         | Last 4 digits of account number 6 7 0 0   |
| City State ZIP Code                                |   |
| Bill Me Later, Inc.                                | On which entry in Part 1 or Part 2 did you list the original creditor?                      |
| PO Box 5138  | Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims                 |
| Number Street                                      | Part 2: Creditors with Nonpriority Unsecured  |
|  | Claims  |
|  |   |
| Timonium, MD 21094  City State ZIP Code            | Last 4 digits of account number 1 4 4 0   |

Gessified 8280806vamPiec 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main

First Name Middle Name Document Page 28 of 66

Part 3: List Others to Be Notified About a Debt That You Already Listed

| SYNCB/Amazon F                 | PLCC      |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
|--------------------------------|-----------|----------|--|
|                                |           |          | Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims                   |
| PO Box 965015<br>Number Street |           |          | ☐ Part 2: Creditors with Nonpriority Unsecured Claim   |
|                                |           |          | T all 2. Orealto's with Northholity of secured oralling  |
| Orlando, Florida 3             | 2896-5015 |          | Last 4 digits of account number 2 3 3 4  |
| City                           | State     | ZIP Code |  |
| Name                           |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
| Name                           |           |          | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims                         |
| Number Street                  |           |          | □ Part 2: Creditors with Nonpriority Unsecured   |
|                                |           |          | Claims   |
| City                           | State     | ZIP Code | Last 4 digits of account number  |
|                                |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
| Name                           |           |          | Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims                        |
| Number Street                  |           |          | Part 2: Creditors with Nonpriority Unsecured   |
|                                |           |          | Claims   |
|                                |           |          | Last 4 digits of account number  |
| City                           | State     | ZIP Code |  |
| Name                           |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
|                                |           |          | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims                         |
| Number Street                  |           |          | ☐ Part 2: Creditors with Nonpriority Unsecured   |
|                                |           |          | Claims   |
| City                           | State     | ZIP Code | Last 4 digits of account number  |
|                                |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
| Name                           |           |          |  |
| Number Street                  |           |          | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims                          |
| tumber energy                  |           |          | Part 2: Creditors with Nonpriority Unsecured Claims  |
|                                |           |          | Last 4 digits of account number  |
| City                           | State     | ZIP Code | Lust 4 digits of docount fidings:  |
| Name                           |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
|                                |           |          | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims                         |
| Number Street                  |           |          | ☐ Part 2: Creditors with Nonpriority Unsecured   |
|                                |           |          | Claims   |
| City                           | State     | ZIP Code | Last 4 digits of account number  |
| Name                           |           |          | On which entry in Part 1 or Part 2 did you list the original creditor?                         |
|                                |           |          | Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims                        |
| Number Street                  |           |          | Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured |
|                                |           |          | Claims   |
|                                |           |          | Last 4 digits of account number  |
| City.                          | State     | ZID Codo | Last 4 digits of account number  |

Gasal Registration | Compared to the control of the

Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|   |   | Total claim   |
|---|---|---|
| 6a. Domestic support obligations  | 6a.   | \$0.00  |
| 6b. Taxes and certain other debts you owe the government  | 6b.   | <u>\$50.00</u>  |
| 6c. Claims for death or personal injury while you were intoxicated  | 6c.   | <u>\$0.00</u>   |
| 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d.   | + \$ 0.00   |
| 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.   | \$ <u>50.00</u>   |
|   |   | Total claim   |
| 6f. Student loans   | 6f.   | \$ <u>150,377.00</u>  |
| 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.   | \$ <u>0.00</u>  |
| 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.   | <u>\$0.00</u>   |
| <ol><li>Other. Add all other nonpriority unsecured claims.<br/>Write that amount here.</li></ol>            | 6i.   | + \$21,354.73   |
| 6j. <b>Total.</b> Add lines 6f through 6i.  | 6j.   | \$171,731.73  |
|   | <ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul> | 6b. Taxes and certain other debts you owe the government 6b.  6c. Claims for death or personal injury while you were intoxicated 6c.  6d. Other. Add all other priority unsecured claims. Write that amount here. 6d.  6e. Total. Add lines 6a through 6d. 6e.  6f. Student loans 6f.  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g.  6h. Debts to pension or profit-sharing plans, and other similar debts 6h.  6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 30 of 66

| Debtor Jennifer Louise Kvamme First Name Middle Nan |                    |      |
|---|--------------------|------|
|   | ie Last Nai        | lame |
| Debtor 2 (Spouse If filing) First Name Middle Nan   | ne Last Nai        | lame |
| United States Bankruptcy Court for the: Northern Di | strict of Illinois |      |
| Case number(If known)                               |                    |      |

#### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with wh | om you l | nave the contract or lease | State what the contract or lease is for |
|-----|-----------|-----------------|----------|----------------------------|---|
| 2.1 |           |                 |          |                            |   |
|     | Name      |                 |          |                            | _                                       |
|     | Number    | Street          |          |                            | _                                       |
|     | City      |                 | State    | ZIP Code                   |   |
| 2.2 |           |                 |          |                            |   |
|     | Name      |                 |          |                            |   |
|     | Number    | Street          |          |                            |   |
|     | City      |                 | State    | ZIP Code                   | -                                       |
| 2.3 |           |                 |          |                            |   |
|     | Name      |                 |          |                            |   |
|     | Number    | Street          |          |                            |   |
|     | City      |                 | State    | ZIP Code                   | _                                       |
| 2.4 |           |                 |          |                            |   |
|     | Name      |                 |          |                            | _                                       |
|     | Number    | Street          |          |                            | _                                       |
|     | City      |                 | State    | ZIP Code                   | -                                       |
| 2.5 |           |                 |          |                            |   |
|     | Name      |                 |          |                            |   |
|     | Number    | Street          |          |                            |   |
|     | City      |                 | State    | ZIP Code                   |   |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 31 of 66

|                  |   | nformation to ide  |  |  |   |   |
|------------------|---|--|--|--|---|---|
| Debte            | or 1  | Jennifer Louise  | Kvamme   |  |   |   |
| D 1.             | •   | First Name   | Middle Name  | Last Name  |   |   |
| Debte<br>(Spou   |   | ) First Name   | Middle Name  | Last Name  |   |   |
| Unite            | ed States E   | Bankruptcy Court fo  | or the: Northern District of II  | llinois  |   |   |
| Case             | number  |  |  |  |   |   |
| (If kn           |   |  |  |  |   | ☐ Check if this is  |
|                  |   |  |  |  |   | amended filing  |
| Offi             | cial F  | orm 106I   | H  |  |   |   |
| Sc               | hedu  | ule H: Y   | <br>our Codebto  | rs   |   | 12/15   |
|                  |   |  |  |  | ukawa Da aa                                     | complete and accurate as possible. If two married peop  |
| re fili<br>ınd n | ing toge<br>umber tl  | ether, both are e<br>the entries in the  | equally responsible for su   | ipplying correct info  | rmation. If me                                  | ecomplete and accurate as possible. It we married peop-<br>pore space is needed, copy the Additional Page, fill it out,<br>s. On the top of any Additional Pages, write your name a   |
| _                | <b>o you h</b> a<br>☑ No  | ave any codebto  | ors? (If you are filing a join   | nt case, do not list eith  | er spouse as                                    | a codebtor.)  |
| Į                | X Yes   |  |  |  |   |   |
|                  |   |  | -  |  |   | Community property states and territories include   |
|                  | •   |  | , Louisiana, Nevada, New   | Mexico, Puerto Rico,   | Texas, Washi                                    | ngton, and Wisconsin.)  |
| Ľ                |   | So to line 3.  | , former spouse, or legal ed   | aviivalant liva viith vav  | at the time?                                    |   |
| _                |   |  | , former spouse, or legal ed   | quivalent live with you  | at the time?                                    |   |
|                  |   |  |  |  |   |   |
|                  | □ N   |  | mounity atota ar tarritary dia   | d van lina?  | ,   | "Il in the name and accurant address of that naves  |
|                  |   |  | munity state or territory dic  | d you live?  | I   | Fill in the name and current address of that person.  |
|                  | ☐ Ye  | es. In which com   | nmunity state or territory dic   |  | I   | Fill in the name and current address of that person.  |
|                  | ☐ Ye  | es. In which com   |  |  | 1   | Fill in the name and current address of that person.  |
|                  | ☐ Ye  | es. In which com   | former spouse, or legal equivalent   |  | 1   | Fill in the name and current address of that person.  |
|                  | Ye  | es. In which com   | former spouse, or legal equivalent   |  |   | Fill in the name and current address of that person.  |
|                  | Ye N  | les. In which com  | former spouse, or legal equivalent   | ;  | ZIP Code  |   |
| s                | Ye Ye N   | Name of your spouse, the Number Street  Street  Street  Street all of your spouse, the Number Street   | former spouse, or legal equivalent State our codebtors. Do not ince a codebtor only if that possible to the codebtor only if the codebtor only if that possible to the codebtor only if the c | lude your spouse as<br>erson is a guarantor                          | ZIP Code a codebtor i                           | Fill in the name and current address of that person.  Figure spouse is filing with you. List the person Make sure you have listed the creditor on e.G (Official Form 106G). Use Schedule D,   |
| s                | N N Columnishown in   | Name of your spouse, in street  City  In 1, list all of your line 2 again as the D (Official Form  | former spouse, or legal equivalent State our codebtors. Do not ince a codebtor only if that possible to the codebtor only if the codebtor only if that possible to the codebtor only if the c | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | f your spouse is filing with you. List the person<br>Make sure you have listed the creditor on  |
| s                | N N Columnishown in Schedule  | Name of your spouse, in street  City  In 1, list all of your line 2 again as the D (Official Form  | State our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.   | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | f your spouse is filing with you. List the person<br>Make sure you have listed the creditor on  |
| s                | N N Columnishown in Schedule  | Name of your spouse, to shame of your line 2 again as the D (Official Forms of E/F, or Scheduler).  | State our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.   | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | i your spouse is filing with you. List the person<br>Make sure you have listed the creditor on<br>e G (Official Form 106G). Use <i>Schedule D,</i>  |
| s<br>3           | N N Column Schedule Column  | Name of your spouse, to which come street  Sity  In 1, list all of your line 2 again as the D (Official Former E/F, or Schedum 1: Your codebte   | State our codebtors. Do not ince a codebtor only if that perm 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | f your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| s<br>3           | N N Column Schedule Column  | Name of your spouse, to shame of your line 2 again as the D (Official Forms of E/F, or Scheduler).  | State our codebtors. Do not ince a codebtor only if that perm 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | if your spouse is filing with you. List the person Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debte Check all schedules that apply:  |
| s<br>3           | N  N  Column  Column  Column  Column  Column  Tom at Name  1358 4                               | les. In which com lame of your spouse, to the second of th | State our codebtors. Do not ince a codebtor only if that perm 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Dfficial Form 106E/F) | ZIP Code a codebtor i                           | f your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line 4.2                                       |
| s<br>3           | N  N  Column  Column  Column  Column  Tom at Name  1358 4  Number                               | Name of your spouse, to shame of the | State  our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Official Form 106E/F) | ZIP Code  a codebtor i or cosigner.             | if your spouse is filing with you. List the person Make sure you have listed the creditor on a G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debte Check all schedules that apply:  |
| s<br>s           | N  N  Column  Column  Column  Column  Column  Tom at Name  1358 4                               | Name of your spouse, to shame of the | State our codebtors. Do not ince a codebtor only if that perm 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Official Form 106E/F) | ZIP Code a codebtor i                           | f your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line 4.2                                       |
| s<br>s<br>s      | N  N  Con Column  Schedule  Schedule  Column  Tom at Name  1358 4  Number  Milaca               | Name of your spouse, to shame of the | State  our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Official Form 106E/F) | ZIP Code  a codebtor i or cosigner. or Schedule | i your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line 4.2 Schedule G, line                      |
| s<br>s<br>s      | N  N  Con Column  Schedule  Schedule  Column  Tom at Name  1358 4  Number  Milaca               | Name of your spouse, to shame of the | State  our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Official Form 106E/F) | ZIP Code  a codebtor i or cosigner. or Schedule | f your spouse is filing with you. List the person  Make sure you have listed the creditor on  G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Schedule D, line Schedule E/F, line 4.2  Schedule G, line Schedule D, line |
| s                | N  N  R  N  Con Column  Schedule  Schedule  Column  Tom all  Name  1358 4  Number  Milaca  City | Name of your spouse, to shame of the | State  our codebtors. Do not ince a codebtor only if that pur 106D), Schedule E/F (Cule G to fill out Column 2.  | lude your spouse as<br>erson is a guarantor<br>Official Form 106E/F) | ZIP Code  a codebtor i or cosigner. or Schedule | i your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  Schedule D, line Schedule E/F, line 4.2 Schedule G, line                      |

Official Form 106H Schedule H: Your Codebtors page 1 of \_1\_

State

ZIP Code

ZIP Code

☐ Schedule D, line \_

☐ Schedule E/F, line \_\_\_

☐ Schedule G, line \_

City

Name

Number

City

Street

3.3

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 32 of 66

|  | our case:                 |   |               |  |
|--|---------------------------|---|---------------|--|
| longifor Louise Kugar  |                           |   |               |  |
| btor 1 Jennifer Louise Kvamr<br>First Name   | Middle Name               | Last Name   |               |  |
| btor 2 pouse, if filing) First Name  | Middle Name               | Last Name   |               |  |
| ited States Bankruptcy Court for the:  |                           |   |               |  |
|  | TOTAL DISTRICT OF HIM OIS |   |               |  |
| se number<br>known)  |                           |   | Check if this |  |
|  |                           |   | An amend      | ded filing<br>ment showing post-petition |
|  |                           |   |               | 3 income as of the following date:       |
| icial Form 106I  |                           |   | MM / DD /     | YYYY                                     |
| chedule I: You   | r Income                  |   |               | 12/15                                    |
|  |                           |   |               | 2), both are equally responsible for     |
| art 1: Describe Employm  | ent                       | Dahim d   |               | Dahtan 2 an man ("Wan an an an           |
| information.   |                           | Debtor 1  |               | Debtor 2 or non-filing spouse            |
| If you have more than one job, attach a separate page with information about additional employers. | Employment status         | <ul><li>☑ Employed</li><li>☑ Not employed</li></ul> |               | ☐ Employed ☐ Not employed                |
| Include part-time, seasonal, or self-employed work.  |                           | Office Support Associate                            |               |  |
| Occupation may Include student or homemaker, if it applies.  | Occupation                | Office Support Associate                            |               |  |
| or mornance, in it applices  | Empleyer's name           | University of Illinois Extens                       | sion          |  |
| or nomenator, a respective   | Employer's name           |   |               |  |
| о положаю, и акрисо.   | . ,                       | 424 W. Binna Bood                                   |               |  |
| о положения  | Employer's address        | 421 W. Pines Road<br>Number Street                  |               | Number Street                            |
|  | . ,                       |   |               | Number Street                            |
|  | . ,                       |   |               | Number Street                            |
|  | . ,                       | Number Street  Oregon, Il 61061                     | ZIP Code      | Number Street  City State ZIP Code       |

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

\$\_2,291.47

\$2,291.47

3. **+**\$ 0.00

\$ 0.00

\$ 0.00

**+** \$ 0.00

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 33 of 66

Debtor 1

Jennifer Louise Kvamme
First Name Middle Name

Last Name

Case number (if known)\_

|   |            | For Debtor 1                |          | For Debtor 2 or non-filing spouse |          |                       |
|---|------------|-----------------------------|----------|-----------------------------------|----------|-----------------------|
| Copy line 4 here  | 4.         | \$ 2,291.47                 |          | \$_0.00                           |          |                       |
| 5. List all payroll deductions:   |            |                             |          |                                   |          |                       |
|   | <b>-</b> - | • 266 72                    |          | ф O OO                            |          |                       |
| 5a. Tax, Medicare, and Social Security deductions   | 5a.        | \$ 366.73                   | -        | \$ 0.00                           |          |                       |
| 5b. Mandatory contributions for retirement plans  | 5b.        | \$ 0.00                     | -        | \$ 0.00                           |          |                       |
| 5c. Voluntary contributions for retirement plans  | 5c.        | \$ <u>212.01</u>            | -        | \$ 0.00                           |          |                       |
| 5d. Required repayments of retirement fund loans  | 5d.        | \$ 0.00<br>c 140.46         | -        | \$ 0.00                           |          |                       |
| 5e. Insurance   | 5e.        | \$ <u>149.46</u><br>\$ 0.00 | -        | \$ <u>0.00</u><br>\$ 0.00         |          |                       |
| 5f. Domestic support obligations  | 5f.        | \$ 40.58                    | -        | \$ 0.00                           |          |                       |
| 5g. Union dues  | 5g.        | ,                           | -        |                                   |          |                       |
| 5h. Other deductions. Specify:  | 5h.        | +\$ 0.00                    | -        | + \$ 0.00                         |          |                       |
| 6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.  | 6.         | \$ <u>768.78</u>            | -        | \$ 0.00                           |          |                       |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$_1,522.69                 | -        | \$_0.00                           |          |                       |
| 8. List all other income regularly received:  |            |                             |          |                                   |          |                       |
| 8a. Net income from rental property and from operating a business, profession, or farm  |            |                             |          |                                   |          |                       |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   | 8a.        | \$_0.00                     | -        | \$_0.00                           |          |                       |
| 8b. Interest and dividends  | 8b.        | \$ 0.00                     | _        | \$_0.00                           |          |                       |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive   | nt         |                             |          |                                   |          |                       |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.        | \$ 0.00                     | -        | \$ 0.00                           |          |                       |
| 8d. Unemployment compensation   | 8d.        | \$_0.00                     | -        | \$_0.00                           |          |                       |
| 8e. Social Security   | 8e.        | \$ 0.00                     | -        | \$_0.00                           |          |                       |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | ce<br>8f.  | \$_0.00                     | -        | \$_0.00                           |          |                       |
| 8g. Pension or retirement income  | 8g.        | \$ 0.00                     |          | \$ 0.00                           |          |                       |
|   | •          | +\$ 0.00                    | -        | +\$ 0.00                          |          |                       |
| 8h. Other monthly income. Specify:  | OII.       | ,                           | 7        |                                   | 7        |                       |
| 9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9.         | \$_0.00                     | <u> </u> | \$_0.00                           | <u> </u> |                       |
| 10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.        | \$ <u>1,522.69</u>          | +        | \$_0.00                           | =        | \$ <u>1,522.69</u>    |
| 11. State all other regular contributions to the expenses that you list in Sched  | dule J     | <u>!</u>                    |          |                                   |          |                       |
| Include contributions from an unmarried partner, members of your household, y friends or relatives.   |            |                             |          |                                   |          |                       |
| Do not include any amounts already included in lines 2-10 or amounts that are   | not av     | ailable to pay expe         | ense     |                                   |          |                       |
| Specify:  |            |                             |          | . 11                              | . +      | \$0.00                |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S  |            |                             |          | •                                 |          | \$_1,522.69  Combined |
| 13. Do you expect an increase or decrease within the year after you file this f   | orm?       |                             |          |                                   |          | monthly income        |
| <ul><li>X No.</li><li>✓ Yes. Explain:</li></ul>   |            |                             |          |                                   |          |                       |

## Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 34 of 66

|           |  | Document  | Page 34 01 00                   |                       |                     |
|-----------|--|---|---------------------------------|-----------------------|---------------------|
|           | Fill in this information to identify y   | our case:   |                                 |                       |                     |
| 1         | Debtor 1 Jennifer Louise Kvamm First Name  | Middle Name Last Name   | Check if this                   | is:                   |                     |
|           | Debtor 2   |   | An ameno                        | ded filing            |                     |
|           | (Spouse, if filing) First Name   | Middle Name Last Name   |                                 | nent showing post-p   | petition chapter 13 |
| ۱ ا       | United States Bankruptcy Court for the:  | Northern District of Illinois   |                                 | as of the following   |                     |
|           | Case number(If known)  |   | MM / DD /                       | YYYY                  |                     |
| C         | Official Form 106J   |   |                                 |                       |                     |
| S         | Schedule J: You  | ır Expenses   |                                 |                       | 12/15               |
| in<br>(if | -  | ssible. If two married people are filin d, attach another sheet to this form.       |                                 |                       | -                   |
| 1.        | Is this a joint case?  |   |                                 |                       |                     |
|           | <ul><li>☑ No. Go to line 2.</li><li>☑ Yes. Does Debtor 2 live in a s</li></ul>         | eparate household?  |                                 |                       |                     |
|           | ☐ No☐ Yes. Debtor 2 must file  | e Official Forms 106J-2, Expenses for   | Separate Household of Debtor 2. |                       |                     |
| 2.        | Do you have dependents?  | ☑ No  | Dependent's relationship to     | Dependent's           | Does dependent live |
|           | Do not list Debtor 1 and Debtor 2.   | Yes. Fill out this information for each dependent                                   | Debtor 1 or Debtor 2            | age                   | with you?           |
|           | Do not state the dependents'   |   |                                 |                       | ☐ No<br>☐ Yes       |
|           | names.   |   |                                 |                       | □ No                |
|           |  |   |                                 |                       | ☐ Yes               |
|           |  |   |                                 |                       | □ No                |
|           |  |   |                                 |                       | Yes                 |
|           |  |   |                                 |                       | ☐ No                |
|           |  |   |                                 |                       | Yes                 |
|           |  |   |                                 |                       | ☐ No                |
|           |  |   |                                 |                       | ☐ Yes               |
| 3.        | Do your expenses include expenses of people other than yourself and your dependents?   | No     Yes  |                                 |                       |                     |
| P         |  | ng Monthly Expenses   |                                 |                       |                     |
|           |  | <u> </u>  | ro using this form as a supplom | ont in a Chantor 13 ( | easo to roport      |
| е         |  | bankruptcy filing date unless you a skruptcy is filed. If this is a supplement      | -                               |                       |                     |
| li        | <br>nclude expenses paid for with non  | n-cash government assistance if you<br>I it on <i>Schedule I: Your Income</i> (Offi |                                 | Your expe             | nses                |
| 2         | <ol> <li>The rental or home ownership e<br/>any rent for the ground or lot.</li> </ol> | expenses for your residence. Include  | first mortgage payments and     | \$ <u>620.00</u>      |                     |
|           |  |   |                                 |                       |                     |

If not included in line 4: \$ 0.00 Real estate taxes 4a. 4a. \$ 0.00 Property, homeowner's, or renter's insurance 4b. 4b. \$ 20.00 Home maintenance, repair, and upkeep expenses 4c. 4c. Homeowner's association or condominium dues \$0.00 4d. 4d.

# Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 35 of 66

Debtor 1

Jennifer Louise Kvamme
First Name Middle Name Last Name

Case number (if known)\_

| 5. Additional mortgage payments for your residence, such as home equity loans  |      |                  |
|--|------|------------------|
|  | 5.   | \$_0.00          |
| 6. Utilities:  |      |                  |
| 6a. Electricity, heat, natural gas   | 6a.  | <b>\$</b> 150.00 |
| 6b. Water, sewer, garbage collection   | 6b.  | \$ 50.00         |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.  | \$ 120.00        |
| 6d. Other. Specify:  | 6d.  | \$_0.00          |
| 7. Food and housekeeping supplies  | 7.   | \$ 300.00        |
|  |      |                  |
| 8. Childcare and children's education costs  | 8.   |                  |
| 9. Clothing, laundry, and dry cleaning   | 9.   | \$ 25.00         |
| 10. Personal care products and services  | 10.  | \$ 20.00         |
| 11. Medical and dental expenses  | 11.  | \$_0.00          |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  | 12.  | \$_75.00         |
| 3. Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.  | \$_25.00         |
| 4. Charitable contributions and religious donations  | 14.  | \$ 0.00          |
| <ul><li>15. Insurance.</li><li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li></ul>   |      |                  |
| 15a. Life insurance  | 15a. | \$ 0.00          |
| 15b. Health insurance  | 15b. | \$ <u>0.00</u>   |
| 15c. Vehicle insurance   | 15c. | \$_75.00         |
| 15d. Other insurance. Specify:   | 15d. | \$_0.00          |
| 6. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:   | 16.  | \$_0.00          |
| 7. Installment or lease payments:  |      |                  |
| 17a. Car payments for Vehicle 1  | 17a. | \$ <u>140.00</u> |
| 17b. Car payments for Vehicle 2  | 17b. | \$ <u>0.00</u>   |
| 17c. Other. Specify: Student Loan  | 17c. | \$_97.00         |
| 17d. Other. Specify:   | 17d. | \$               |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).   | 18.  | \$ 0.00          |
|  |      | Ψ                |
| 9. Other payments you make to support others who do not live with you.  Specify:   | 19.  | \$_0.00          |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom  |      |                  |
| 20a. Mortgages on other property   | 20a. | \$ <u>0.00</u>   |
| 20b. Real estate taxes   | 20b. | \$_0.00          |
| 20c. Property, homeowner's, or renter's insurance  | 20c. | \$_0.00          |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. | \$_0.00          |
| the contract of the contract o |      | \$_0.00          |

# Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 36 of 66

| Jennifer Louise Kvamme  | Case number (if known)   |                                  |
|---|--|----------------------------------|
| First Name Middle Name Last Name  | ,  |                                  |
| Specify:  | 21.  | +\$_0.00                         |
| te your monthly expenses. If lines 4 through 21. By line 22 (monthly expenses for Debtor 2), if any, from Official For I line 22a and 22b. The result is your monthly expenses. | rm 106J-2<br>22.   | \$ 1,717.00<br>\$<br>\$ 1,717.00 |
| your monthly net income.  |  |                                  |
| py line 12 (your combined monthly income) from Schedule I.  | 23a.   | \$ <u>1,522.69</u>               |
| py your monthly expenses from line 22 above.  | 23b.   | <b>-</b> \$ 1,717.00             |
| otract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .   | 23c.   | \$ <u>-194.31</u>                |
| ple, do you expect to finish paying for your car loan within the yea  | r or do you expect your  |                                  |
| Explain here:   |  |                                  |
|   | Expecify:  Let your monthly expenses. If lines 4 through 21. By line 22 (monthly expenses for Debtor 2), if any, from Official For I line 22a and 22b. The result is your monthly expenses.  Let your monthly net income.  By line 12 (your combined monthly income) from Schedule I.  By your monthly expenses from line 22 above.  By your monthly expenses from your monthly income.  By tract your monthly expenses from your monthly income.  By tract your monthly net income.  By the provided monthly income income.  By your monthly expenses from your monthly income.  By the provided monthly income income. | Epecify:                         |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 37 of 66

| Fill in this in                 | formation to identif     | y your case:          |                     |
|---------------------------------|--------------------------|-----------------------|---------------------|
| Debtor 1                        | Jennifer<br>First Name   | Louise<br>Middle Name | Kvamme<br>Last Name |
| Debtor 2<br>(Spouse, if filing) | First Name               | Middle Name           | Last Name           |
| United States I                 | Bankruptcy Court for the | Northern Distric      | et of Illinois      |
| Case number                     | (If known)               |                       |                     |

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|  | Your assets Value of what you own |
|--|-----------------------------------|
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$ 63,200.00                      |
| 1ь. Copy line 62, Total personal property, from Schedule A/B   | \$ <u>11,858.05</u>               |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ <u>67,199.82</u>               |
| Part 2: Summarize Your Liabilities   |                                   |
|  | Your liabilities Amount you owe   |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ 58,755.00                      |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                             | \$ <u>50.00</u>                   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | <b>+</b> \$ <u>171,731.73</u>     |
| Your total liabilities   | \$ <u>230,536.73</u>              |
| Part 3: Summarize Your Income and Expenses   |                                   |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$ <u>1,522.69</u>                |
| 5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J  | \$ <u>1,717.00</u>                |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 38 of 66

Debtor 1 Jennifer Louise Kvamme Case number (if known)

| P  | art 4: Answer These Questions for Administrative and Statistical Records  |   |                    |
|----|---|---|--------------------|
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this formation Yes   | orm to the court with your other                    | r schedules.       |
| 7. | What kind of debt do you have?  ☑ Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purpose.  ☐ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules. | ses. 28 U.S.C. § 159.                               |                    |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.   | come from Official                                  | \$ <u>2,291.47</u> |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:  | Total claim   |                    |
|    | From Part 4 on Schedule E/F, copy the following:  |   |                    |
|    | <ul><li>9a. Domestic support obligations (Copy line 6a.)</li><li>9b. Taxes and certain other debts you owe the government. (Copy line 6b.)</li><li>9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)</li></ul>  | \$ <u>0.00</u><br>\$ <u>50.00</u><br>\$ <u>0.00</u> |                    |
|    | <ul> <li>9d. Student loans. (Copy line 6f.)</li> <li>9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> <li>9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)</li> </ul>  | \$150,377.00<br>\$0.00<br>+ \$0.00                  |                    |
|    | 9g. <b>Total.</b> Add lines 9a through 9f.  | \$_150,427.00                                       |                    |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 39 of 66

| Fill in this in                 | Fill in this information to identify your case: |                  |                        |  |  |  |
|---------------------------------|---|------------------|------------------------|--|--|--|
| Debtor 1                        | Jennifer Louise Kvamm                           | e<br>Middle Name | Last Name              |  |  |  |
| Debtor 2<br>(Spouse, if filing) | First Name                                      | Middle Name      | Last Name              |  |  |  |
| United States                   | Bankruptcy Court for the: _                     | Norther          | n District Of Illinois |  |  |  |
| Case number<br>(If known)       |   |                  |                        |  |  |  |

☐ Check if this is an amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |  |
|---|--|
|   |  |
| id you pay or agree to pay someone who  | o is NOT an attorney to help you fill out bankruptcy forms?        |
| <b>1</b> No   |  |
| Yes. Name of person   | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and   |
|   | Signature (Official Form 119).                                     |
|   |  |
|   |  |
|   |  |
|   |  |
| nder nevelty of nevirons I declare that I b                                   | ave read the augment and calculate filed with this deployation and |
| nder penaity of perjury, I declare that I n<br>hat they are true and correct. | ave read the summary and schedules filed with this declaration and |
| iat they are true and correct.  |  |
|   |  |
|   |  |
|   | ×  |
| s/Jennifer Louise Kvamme  |  |
| s/Jennifer Louise Kvamme Signature of Debtor 1                                | <del></del>  |
| s/Jennifer Louise Kvamme Signature of Debtor 1                                | Signature of Debtor 2  |
| Signature of Debtor 1   | Signature of Debtor 2  |
|   |  |

# Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 40 of 66

| Fill in this information to identify your case: |                           |                               |           |  |  |  |  |
|---|---------------------------|-------------------------------|-----------|--|--|--|--|
| Debtor 1  | Jennifer                  | Louise                        | Kvamme    |  |  |  |  |
| D 11 0  | First Name                | Middle Name                   | Last Name |  |  |  |  |
| Debtor 2<br>(Spouse, if filing)                 | First Name                | Middle Name                   | Last Name |  |  |  |  |
| United States I                                 | Bankruptcy Court for the: | Northern District of Illinois |           |  |  |  |  |
| Case number<br>(If known)                       |                           |                               |           |  |  |  |  |

☐ Check if this is an amended filing

## Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1 | : Give Details Abou  | ut Your Marital Stat | us and Where Yo               | ou Lived Before                                      |                    |                            |
|--------|--|----------------------|-------------------------------|--|--------------------|----------------------------|
|        | at is your current marita<br>Married<br>Not married            | I status?            |                               |  |                    |                            |
| X      | ing the last 3 years, hav<br>No<br>Yes. List all of the places |                      |                               |  |                    |                            |
|        | Debtor 1:  |                      | Dates Debtor 1<br>lived there | Debtor 2:  |                    | Dates Debtor 2 ived there  |
|        | Number Street  |                      | From<br>To                    | Same as Debtor 1  Number Street                      |                    | Same as Debtor 1  From  To |
|        | City   | State ZIP Code       |                               | City State ZIF                                       | Code               |                            |
|        | Number Street  |                      | From<br>To                    | Same as Debtor 1  Number Street                      |                    | Same as Debtor 1  From To  |
|        |  |                      |                               | alent in a community property state or               |                    | unity property states      |
| X      |  |                      |                               | v Mexico, Puerto Rico, Texas, Washingtor<br>n 106H). | n, and Wisconsin.) |                            |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 41 of 66

Last Name

Jennifer Louise Kvamme
First Name Middle Name Case number (if known)\_

| From January 1 of current year until                                    | Debtor 1 Sources of income Check all that apply.                                     | Gross income   | Debtor 2   |   |
|---|--|--|--|---|
| From January 1 of current year until                                    | Sources of income  | Gross income   | Debtor 2   |   |
| From January 1 of current year until                                    |  | Gross income   |  |   |
| i rom January i or current year until                                   |  | (before deductions and exclusions)                               | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) |
| the date you filed for bankruptcy:                                      | <ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>     | \$ <u>2,446.20</u>   | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul> | \$  |
| For last calellual year.  | Wages, commissions, bonuses, tips  | \$ <u>27,461.74</u>  | Wages, commissions, bonuses, tips  | \$  |
| (January 1 to December 31, 2017 YYYY                                    | Operating a business   |  | Operating a business   |   |
| For the calendar year before that:                                      | <ul><li>☑ Wages, commissions, bonuses, tips</li><li>☑ Operating a business</li></ul> | \$ <u>32,647.00</u>  | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul> | \$  |
| ☑ No<br>☑ Yes. Fill in the details.                                     |  |  |  |   |
|   | Debtor 1   |  | Debtor 2   |   |
|   | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below.   | Gross income from each source (before deductions and  |
|   |  | CACIUSIONS)  |  | exclusions)   |
| From January 1 of current year until                                    |  |  |  | ,   |
| From January 1 of current year until the date you filed for bankruptcy: |  | \$<br>\$   |  | ,   |
|   |  |  |  | ,   |
| the date you filed for bankruptcy:                                      |  | \$<br>\$<br>\$   |  | \$\$<br>\$\$  |
| the date you filed for bankruptcy:                                      |  | \$<br>\$<br>\$   |  | \$\$<br>\$\$  |
| the date you filed for bankruptcy:                                      |  | \$<br>\$<br>\$   |  | \$\$<br>\$\$  |
| For last calendar year:  (January 1 to December 31,)                    |  | \$<br>\$<br>\$<br>\$<br>\$                                       |  | \$\$<br>\$\$  |

Debtor 1

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 42 of 66

Debtor 1 Jennifer Louise Kvamme Case number (if known)

| -ile citilei | Debtor 1's or Del                                     | otor 2's deb  | ts primarily c   | onsumer debi        | ts?  |  |  |
|--------------|---|---------------|------------------|---------------------|--|--|--|
|              |   |               |                  |                     | ebts. Consumer debts ar<br>nousehold purpose."         | re defined in 11 U.S.C. § 101  | (8) as   |
| D            | Ouring the 90 days                                    | before you fi | led for bankru   | otcy, did you p     | ay any creditor a total of                             | \$6,425* or more?  |  |
|              | No. Go to line 7                                      |               |                  |                     |  |  |  |
|              | total amou  | nt you paid t | hat creditor. De | not include p       |  | or more payments and the upport obligations, such as this bankruptcy case. |  |
| *            |   |               | •                |                     | •  | after the date of adjustment.  |  |
| Yes. D       | ebtor 1 or Debtor                                     | · 2 or both h | ave primarily    | consumer de         | ebts.  |  |  |
|              |   |               |                  |                     | ay any creditor a total of                             | \$600 or more?   |  |
|              | No. Go to line 7                                      |               |                  |                     |  |  |  |
|              | creditor. Do  | o not include | payments for     | domestic supp       | oort obligations, such as<br>ey for this bankruptcy ca | se.  |  |
|              |   |               |                  | Dates of<br>payment | Total amount paid                                      | Amount you still owe   | Was this payment for   |
|              | PHH Mortgag   | е             |                  | 12/13/17            | \$ <u>620.00</u>                                       | \$_54,755.24   |  |
|              | Creditor's Name                                       |               |                  |                     |  |  | ☐ Car  |
|              | PO Box 542 Number Street                              |               |                  |                     |  |  | Credit card  |
|              |   |               |                  |                     |  |  | Loan repayment   |
|              |   |               | 00054            |                     |  |  | ☐ Suppliers or vendor  |
|              | NAL I access  | NJ            | 2IP Code         |                     |  |  | ☐ Other  |
|              | Mt. Laurel<br>City                                    | State         | 211 0000         |                     |  |  |  |
|              | City  |               |                  |                     | \$   | \$   | ☐ Mortgage   |
|              |   |               |                  |                     | \$   | \$   |  |
|              | City  |               |                  |                     | \$   | \$   | ☐ Mortgage   |
|              | City  Creditor's Name                                 |               |                  |                     | \$   | \$   | ☐ Mortgage   |
|              | City  Creditor's Name                                 |               |                  |                     | \$   | _ \$   | ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment  |
|              | City  Creditor's Name                                 |               | ZIP Code         |                     | \$   | \$   | Mortgage Car Credit card Loan repayment Suppliers or vendor                                |
|              | Creditor's Name  Number Street                        | State         |                  |                     |  | _ \$   | ☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendor ☐ Other              |
|              | Creditor's Name  Number Street                        | State         |                  |                     | \$   |  | Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage                 |
|              | Creditor's Name  Number Street  City  Creditor's Name | State         |                  |                     |  |  | Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car             |
|              | Creditor's Name  Number Street  City                  | State         |                  |                     |  |  | Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card |
|              | Creditor's Name  Number Street  City  Creditor's Name | State         |                  |                     |  |  | Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car            |

First Name

Middle Name

Last Name

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 43 of 66

Case number (if known)\_

Jennifer Louise Kvamme
First Name Middle Name

Last Name

Debtor 1

| ithin 1 year before you filed for bankruptcy, desiders include your relatives; any general partner or prorations of which you are an officer, director, pent, including one for a business you operate as each as child support and alimony. | rs; relatives of any goerson in control, or | general partners; partners of 20% or n | artnerships of which<br>nore of their voting | n you are a general partner;<br>securities; and any managing                      |
|--|---|--|--|---|
| No Yes. List all payments to an insider.   |   |  |  |   |
| Too. List all paymone to all motion.   | Dates of payment                            | Total amount paid                      | Amount you still owe                         | Reason for this payment   |
| Insider's Name   |   | \$                                     | \$   |   |
| Number Street  |   |  |  |   |
| City State ZIP Code  | _   |  |  |   |
| Insider's Name   |   | \$                                     | \$   |   |
|  |   |  |  |   |
| Number Street  |   |  |  |   |
| Number Street  City State ZIP Code   |   |  |  |   |
| City State ZIP Code  ithin 1 year before you filed for bankruptcy, di in insider?  clude payments on debts guaranteed or cosigne   | d by an insider.                            | ayments or transf                      | er any property on                           | account of a debt that benefited  |
| City State ZIP Code ithin 1 year before you filed for bankruptcy, di n insider? clude payments on debts guaranteed or cosigne  | d by an insider.                            | Total amount                           | er any property on  Amount you still owe     | account of a debt that benefited  Reason for this payment Include creditor's name |
| City State ZIP Code  ithin 1 year before you filed for bankruptcy, di in insider?  clude payments on debts guaranteed or cosigne   | d by an insider.                            | Total amount                           | Amount you still                             | Reason for this payment   |
| City State ZIP Code  Ithin 1 year before you filed for bankruptcy, die insider?  I clude payments on debts guaranteed or cosigne  No  Yes. List all payments that benefited an insider   | d by an insider.                            | Total amount paid                      | Amount you still owe                         | Reason for this payment   |
| City State ZIP Code  ithin 1 year before you filed for bankruptcy, di in insider?  clude payments on debts guaranteed or cosigne  No  Yes. List all payments that benefited an insider  Insider's Name                                       | d by an insider.                            | Total amount paid                      | Amount you still owe                         | Reason for this payment   |
| City State ZIP Code  Ithin 1 year before you filed for bankruptcy, die insider?  Clude payments on debts guaranteed or cosigne  No Yes. List all payments that benefited an insider  Insider's Name  Number Street  City State ZIP Code      | d by an insider.                            | Total amount paid                      | Amount you still owe                         | Reason for this payment   |
| City State ZIP Code  ithin 1 year before you filed for bankruptcy, din insider?  clude payments on debts guaranteed or cosigne  No Yes. List all payments that benefited an insider  Insider's Name  Number Street                           | d by an insider.                            | Total amount paid                      | Amount you still owe                         | Reason for this payment   |

City

ZIP Code

State

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 44 of 66

Debtor 1 Jennifer Louise Kvamme Case number (if known)\_\_\_\_\_\_

| all such matters, including pers<br>contract disputes.         | onal injury cases, | small claims actions, d   | ivorces, collection suits, paterni   | ty actions, suppo | rt or custody modificatio |
|--|--------------------|---|--|-------------------|---------------------------|
| No<br>⁄es. Fill in the details.                                |                    |   |  |                   |                           |
|  | Natur              | e of the case   | Court or agency  |                   | Status of the case        |
| Case title_  |                    |   |  |                   | — Pending                 |
| Case IIIIe   |                    |   | Court Name   |                   | On appeal                 |
|  |                    |   | Number Street  |                   | Concluded                 |
| Case number  |                    |   |  |                   |                           |
|  |                    |   | City State   | e ZIP Code        |                           |
| Case title   |                    |   |  |                   | — Pending                 |
| Case IIIIe   |                    |   | Court Name   |                   | On appeal                 |
|  |                    |   | Number Street  |                   | Concluded                 |
| Case number  |                    |   | -  |                   |                           |
|  |                    |   | City State   | e ZIP Code        |                           |
| No. Go to line 11.  Yes. Fill in the information below         | w.                 |   |  |                   |                           |
|  | w.                 | Describe the proper   | rty  | Date              | Value of the property     |
|  | w.                 | Describe the proper   | rty  | Date              |                           |
|  | w.                 | Describe the proper   | rty  | Date              | Value of the property     |
| es. Fill in the information below                              | w.                 | Describe the proper   |  | Date              |                           |
| res. Fill in the information below                             | w.                 | -   | ned  | Date              |                           |
| res. Fill in the information below                             | w.                 | Explain what happe Property was Property was  | ned repossessed. foreclosed.   | Date              |                           |
| Creditor's Name  Number Street                                 |                    | Explain what happe Property was Property was Property was   | ned repossessed. foreclosed. garnished.  | Date              |                           |
| Creditor's Name  Number Street                                 | W.  State ZIP Code | Explain what happe Property was Property was Property was   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   | Date              | \$                        |
| Creditor's Name  Number Street                                 |                    | Explain what happe Property was Property was Property was Property was Property was   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   |                   | \$                        |
| Creditor's Name  Number Street  City                           |                    | Explain what happe Property was Property was Property was Property was Property was   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   |                   | \$                        |
| Creditor's Name  Number Street                                 |                    | Explain what happe Property was Property was Property was Property was Property was   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   |                   | \$Value of the propert    |
| Creditor's Name  Number Street  City                           |                    | Explain what happe Property was Property was Property was Property was Property was   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   |                   | \$Value of the propert    |
| Creditor's Name  City  Creditor's Name  City  Creditor's Name  |                    | Explain what happe Property was Property was Property was Property was Describe the property Explain what happe   | ned repossessed. foreclosed. garnished. attached, seized, or levied.                                   |                   | \$Value of the propert    |
| Creditor's Name  City  Creditor's Name  City  Creditor's Name  |                    | Explain what happe Property was Property was Property was Property was Describe the property Explain what happe   | ned repossessed. foreclosed. garnished. attached, seized, or levied. rty  ned repossessed.             |                   | \$Value of the propert    |
| Creditor's Name  Number Street  Creditor's Name  Number Street |                    | Explain what happe Property was Property was Property was Property was Property was Explain what happe Property was Property was Property was Property was Property was | ned repossessed. foreclosed. garnished. attached, seized, or levied. rty  ned repossessed. foreclosed. |                   | Value of the propert      |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 45 of 66

Jennifer Louise Kvamme

Middle Name

Last Name

Debtor 1

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-\_\_\_ \_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Describe the gifts Gifts with a total value of more than \$600 Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you \_

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 46 of 66

| or 1        | Jennifer Louise Kvamme   | Case number (if known)  |                      |                        |
|-------------|--|---|----------------------|------------------------|
|             | First Name Middle Name Last N  | ame   |                      |                        |
|             |  |   |                      |                        |
|             |  | cy, did you give any gifts or contributions with a total value  | of more than \$600   | to any charity?        |
| ⊠ N<br>□ v  | o<br>es. Fill in the details for each gift or contr                                | hution  |                      |                        |
| <b>—</b> Y  | es. Fill in the details for each glit or contri                                    | button.   |                      |                        |
|             | Gifts or contributions to charities that total more than \$600                     | Describe what you contributed   | Date you contributed | Value                  |
|             |  |   | T                    |                        |
|             |  |   |                      | ¢                      |
| Ch          | narity's Name  |   |                      | Ψ                      |
|             | umber Street   |   |                      | \$                     |
| IN          | umber Street   |   |                      |                        |
| _           |  |   |                      |                        |
|             |  |   |                      |                        |
| <br>Ci      | ty State ZIP Code  |   |                      |                        |
|             |  |   |                      |                        |
| t 6:        | List Certain Losses  |   |                      |                        |
| . 6.        | List Certain Losses  |   |                      |                        |
| ı           | es. Fill in the details.  Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss  | Date of your loss    | Value of property lost |
|             |  | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . |                      |                        |
|             |  |   |                      | \$                     |
|             |  |   |                      | Ψ                      |
|             |  |   |                      |                        |
| t 7:        | List Certain Payments or Trans   | fers  |                      |                        |
| Vithi       | n 1 year before you filed for bankrupto  | y, did you or anyone else acting on your behalf pay or trans  | sfer any property to | anyone you             |
|             | ulted about seeking bankruptcy or pre  |   |                      |                        |
|             |  | parers, or credit counseling agencies for services required in yo   | ur bankruptcy.       |                        |
| IJ N<br>⊠ Y | o<br>es. Fill in the details.  |   |                      |                        |
|             |  | Description and value of any property transferred   | Date payment or      | Amount of paymer       |
| _           | Dixon & Giesen Law Offices   | bescription and value of any property transferred   | transfer was made    | Amount of paymen       |
|             | Person Who Was Paid  |   |                      |                        |
|             | 121 East First Street  Number Street   |   | 12/07/17             | \$ <u>100.00</u>       |
|             |  |   |                      |                        |
| -           | Divers II 2000   |   | 01/25/18             | \$_900.00              |
| -           | Dixon         II         61021           City         State         ZIP Code       |   |                      |                        |
|             |  |   |                      |                        |
| Ē           | Email or website address   |   |                      |                        |
| -           | Person Who Made the Payment, if Not You  |   |                      |                        |

Debtor 1

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 47 of 66 Jennifer Louise Kvamme Debtor 1 Case number (if known)\_ Last Name Middle Name Description and value of any property transferred Date payment or Amount of payment transfer was made Access Counseling, Inc. Person Who Was Paid \$ 14.95 01/02/18 633 W. 5th Street Number Street Suite 26001 90071 Los Angelas CA City ZIP Code State Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Street Number ZIP Code State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. X No ☐ Yes. Fill in the details. Description and value of property Date transfer Describe any property or payments received transferred or debts paid in exchange was made Person Who Received Transfer

Official Form 107

Number

Number Street

Person's relationship to you

Person Who Received Transfer

Street

ZIP Code

ZIP Code

State

State

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 48 of 66

Jennifer Louise Kvamme Debtor 1 Case number (if known) Last Name Middle Name 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) X No ☐ Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust \_ Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ■ No ☐ Yes. Fill in the details. Date account was Last 4 digits of account number Type of account or Last balance before closed, sold, moved, instrument closing or transfer or transferred Name of Financial Institution Checking XXXX-\_\_\_ \_ ■ Savings Number Street ■ Money market ■ Brokerage City State ZIP Code Other ☐ Checking XXXX-\_\_\_ Name of Financial Institution ☐ Savings ■ Money market Number Street ■ Brokerage Other City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ■ No ☐ Yes. Fill in the details. Describe the contents Do you still Who else had access to it? have it? □ No Yes Name of Financial Institution Name Number Street Number Street City ZIP Code State

City

State

ZIP Code

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 49 of 66

Case number (if known)\_\_\_

Jennifer Louise Kvamme

Debtor 1

| ☑ No<br>☑ Yes. Fill in the details.  |  |  |   |
|--|--|--|---|
|  | Who else has or had access to it?  | Describe the contents  | Do you still have it?                   |
| Name of Change Facility  | Normal   |  | □ No                                    |
| Name of Storage Facility   | Name   |  | ☐ Yes                                   |
| Number Street  | Number Street  |  |   |
|  | City State ZIP Code  |  |   |
| City State ZIP Code  |  |  |   |
| 19: Identify Property You Hold   | d or Control for Someone Else  |  |   |
| or hold in trust for someone.<br>☑ No<br>☑ Yes. Fill in the details.   |  |  |   |
|  | Where is the property?   | Describe the property  | Value                                   |
| Owner's Name   | _  |  | \$                                      |
| Number Street  | Number Street  |  |   |
|  |  |  |   |
|  | _  |  |   |
| City State ZIP Code  | — City State ZIP Co  | de   |   |
| City State ZIP Code t 10: Give Details About Enviro  |  | de   |   |
|  | nmental Information  | de   |   |
| the purpose of Part 10, the following de Environmental law means any federal, se azardous or toxic substances, wastes including statutes or regulations control  | nmental Information  | erning pollution, contamination, releas<br>ce water, groundwater, or other medit<br>vastes, or material.   | ım,                                     |
| the purpose of Part 10, the following de Environmental law means any federal, se azardous or toxic substances, wastes including statutes or regulations control for means any location, facility, or proper or used to own, operate, or utilize it, in   | nmental Information  efinitions apply: state, or local statute or regulation conce, , or material into the air, land, soil, surfacelling the cleanup of these substances, vecerty as defined under any environmental   | erning pollution, contamination, releas<br>ce water, groundwater, or other medit<br>vastes, or material.<br>al law, whether you now own, operate   | um,<br>or utilize                       |
| the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the finition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of the | nmental Information efinitions apply: state, or local statute or regulation conce, , or material into the air, land, soil, surfa- olling the cleanup of these substances, v perty as defined under any environmenta including disposal sites. environmental law defines as a hazardo   | erning pollution, contamination, releas<br>ce water, groundwater, or other medit<br>vastes, or material.<br>al law, whether you now own, operate   | um,<br>or utilize                       |
| the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the following definition on the following statutes or regulations control of the means any location, facility, or proper or used to own, operate, or utilize it, in the following and the following definition of the following defi | nmental Information efinitions apply: state, or local statute or regulation conce, , or material into the air, land, soil, surfa- olling the cleanup of these substances, v perty as defined under any environmenta including disposal sites. environmental law defines as a hazardo   | erning pollution, contamination, releas<br>ce water, groundwater, or other medit<br>vastes, or material.<br>al law, whether you now own, operate<br>us waste, hazardous substance, toxic   | um,<br>or utilize                       |
| the purpose of Part 10, the following decentric the purpose of Part 10, the following decentric the purpose of Part 10, the following decentric to the purpose of Part 10, the following decentric to the purpose of the | nmental Information efinitions apply: state, or local statute or regulation conce, or material into the air, land, soil, surface elling the cleanup of these substances, vecety as defined under any environmental including disposal sites. environmental law defines as a hazardo int, contaminant, or similar term.   | erning pollution, contamination, release water, groundwater, or other medicastes, or material.  Il law, whether you now own, operate waste, hazardous substance, toxic when they occurred. | um,<br>, or utilize                     |
| the purpose of Part 10, the following december of Part 10, the following december of Part 10, the following december of the purpose of Part 10, the following december of the purpose of t | nmental Information efinitions apply: state, or local statute or regulation conce, , or material into the air, land, soil, surfacelling the cleanup of these substances, verty as defined under any environmental necluding disposal sites. environmental law defines as a hazardont, contaminant, or similar term. ags that you know about, regardless of weather the state of t | erning pollution, contamination, release water, groundwater, or other medicastes, or material.  Il law, whether you now own, operate waste, hazardous substance, toxic when they occurred. | um,<br>, or utilize                     |
| the purpose of Part 10, the following decentric mental law means any federal, substances, wastes including statutes or regulations control of the means any location, facility, or proper or used to own, operate, or utilize it, in the dazardous material means anything an aubstance, hazardous material, pollutariort all notices, releases, and proceeding as any governmental unit notified your law.  | efinitions apply: state, or local statute or regulation conce, or material into the air, land, soil, surfacelling the cleanup of these substances, verty as defined under any environmental necluding disposal sites. environmental law defines as a hazardont, contaminant, or similar term. ags that you know about, regardless of we that you may be liable or potentially liab   | erning pollution, contamination, release water, groundwater, or other medicastes, or material.  Il law, whether you now own, operate waste, hazardous substance, toxic when they occurred. | um,<br>, or utilize                     |
| the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the following definition on the following statutes or regulations control of the means any location, facility, or proportion used to own, operate, or utilize it, in the following and the following definition and | efinitions apply: state, or local statute or regulation conce, or material into the air, land, soil, surfacelling the cleanup of these substances, verty as defined under any environmental necluding disposal sites. environmental law defines as a hazardont, contaminant, or similar term. ags that you know about, regardless of we that you may be liable or potentially liab   | erning pollution, contamination, release water, groundwater, or other medicates, or material.  Il law, whether you now own, operate us waste, hazardous substance, toxicate they occurred. | um,<br>, or utilize<br>:<br>nental law? |
| the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the purpose of Part 10, the following definition on the following definition on the following statutes or regulations control of the means any location, facility, or proper or used to own, operate, or utilize it, in the following and the following definition and the following defi | efinitions apply: state, or local statute or regulation conce, or material into the air, land, soil, surfacelling the cleanup of these substances, verty as defined under any environmental necluding disposal sites. environmental law defines as a hazardont, contaminant, or similar term. ags that you know about, regardless of we that you may be liable or potentially liab   | erning pollution, contamination, release water, groundwater, or other medicates, or material.  Il law, whether you now own, operate us waste, hazardous substance, toxicate they occurred. | um,<br>, or utilize<br>:<br>nental law? |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 50 of 66

| Debtor 1 | Jennifer Louise Kvamme |             |           | Case number (if known) |  |
|----------|------------------------|-------------|-----------|------------------------|--|
|          | First Name             | Middle Name | Last Name |                        |  |

| Have you notified any governmental uni  | t of any release of hazardous materi  | al?  |                    |
|---|---|--|--------------------|
| ☑ No  |   |  |                    |
| Yes. Fill in the details.   |   |  |                    |
|   | Governmental unit   | Environmental law, if you know it                | Date of notice     |
|   |   |  |                    |
| Name of site  | Governmental unit   |  |                    |
| Number Street   | Number Street   |  |                    |
|   |   |  |                    |
|   | City State ZIP Code   |  |                    |
| City State ZIP Code   |   |  |                    |
| lave vou been a party in any judicial or  | administrative proceeding under an  | y environmental law? Include settlements         | and orders.        |
| □ No  |   | ,  |                    |
| Yes. Fill in the details.   |   |  |                    |
|   | Court or agency   | Nature of the case                               | Status of the case |
| Coco title  |   |  | Case               |
| Case title  | Court Name  |  | ☐ Pending          |
|   |   |  | On appeal          |
|   | Number Street   |  | ☐ Conclude         |
| Case number   | <u> </u>  |  |                    |
| Cuse number   | City State ZIP Co   | de   |                    |
| <ul><li>□ A member of a limited liability co</li><li>□ A partner in a partnership</li></ul> | ed in a trade, profession, or other ac<br>ompany (LLC) or limited liability parti |  |                    |
| An officer, director, or managing   | •   |  |                    |
| An owner of at least 5% of the ve   | oting or equity securities of a corpor  | ation  |                    |
| No. None of the above applies. Go to  | o Part 12.  |  |                    |
| Yes. Check all that apply above and   | fill in the details below for each bus  |  |                    |
|   | Describe the nature of the busines  | Employer Identification  Do not include Social S |                    |
| Business Name   |   |  |                    |
| Number Street   | _   | Litt.  |                    |
|   | Name of accountant or bookkeepe   | Pr Dates business existed                        |                    |
|   | _   | From To  |                    |
| City State ZIP Code   |   | 170111 10  |                    |
| Only State Li State   | Describe the nature of the busines  | ss Employer Identification                       | number             |
| Business Name   | _   | Do not include Social S                          |                    |
|   |   | EINI.  |                    |
| Number Street   |   | EIN:   |                    |
|   | Name of accountant or bookkeepe   | Pr Dates business existed                        |                    |
|   | _   |  |                    |
|   |   | From To  |                    |
| City State ZIP Code   | . [   |  |                    |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 51 of 66

Jennifer Louise Kvamme Debtor 1 Case number (if known) Middle Name Last Name **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Dates business existed Name of accountant or bookkeeper From \_\_\_\_\_ To \_\_\_\_ City ZIP Code State 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☑ No. ☐ Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code **Part 12:** Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. s/Jennifer Louise Kvamme Signature of Debtor 1 Signature of Debtor 2 Date 19 February 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? Х Nο ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☑ No. ☐ Yes. Name of person\_ Attach the Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 52 of 66

| Fill in this in                 | formation to identify yo             | our case:   |                         |
|---------------------------------|--------------------------------------|-------------|-------------------------|
| Debtor 1                        | Jennifer Louise Kvammo<br>First Name | Middle Name | Last Name               |
| Debtor 2<br>(Spouse, if filing) | First Name                           | Middle Name | Last Name               |
| United States E                 | Bankruptcy Court for the: _          | Northe      | rn District Of Illinois |
| Case number (If known)          |                                      |             |                         |
|                                 |                                      |             |                         |

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Hold Secured Claims

| nformation below.  |  |  |
|--|--|--|
| Identify the creditor and the property that is collateral  | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C |
| Creditor's<br>name: Huntington National Bank               | ☐ Surrender the property.  | ☐ No   |
|  | Retain the property and redeem it.                               | ☑ Yes  |
| Description of<br>property<br>securing debt: Kia Amanti    | Retain the property and enter into a<br>Reaffirmation Agreement. |  |
|  | Retain the property and [explain]:                               |  |
| Creditor's   | ☐ Surrender the property.  | □ No   |
| name: PHH Mortgage   | Retain the property and redeem it.                               | ☑ Yes  |
| Description of property securing debt: 510 N. Dixon Avenue | Retain the property and enter into a Reaffirmation Agreement.    |  |
| 510 N. Dixon Avenue  | ☐ Retain the property and [explain]:                             |  |
| Creditor's   | ☐ Surrender the property.  | ☐ No   |
| name:  | Retain the property and redeem it.                               | ☐ Yes  |
| Description of property securing debt:                     | Retain the property and enter into a Reaffirmation Agreement.    |  |
|  | ☐ Retain the property and [explain]:                             |  |
| Creditor's   | ☐ Surrender the property.  | □ No   |
| name:  | Retain the property and redeem it.                               | ☐ Yes  |
| Description of property securing debt:                     | Retain the property and enter into a Reaffirmation Agreement.    |  |
|  | Retain the property and [explain]:                               |  |

12/15

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Page 53 of 66 Document

Your name

Jennifer Louise Kvamme
First Name Middle Name

Last Name

| Case number ( | (If known) |
|---------------|------------|
|---------------|------------|

| or any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G), I in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet nded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |  |                            |  |
|---|--|----------------------------|--|
| Describe your unexpired personal propert  | ty leases  | Will the lease be assumed? |  |
| _essor's name:  |  | □ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| _essor's name:  |  | □ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| Lessor's name:  |  | ☐ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| Lessor's name:  |  | □ No □ Yes                 |  |
| Description of leased property:   |  | Tes Tes                    |  |
| Lessor's name:  |  | □ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| Lessor's name:  |  | □ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| Lessor's name:  |  | □ No                       |  |
| Description of leased property:   |  | ☐ Yes                      |  |
| Lessor's name:  Description of leased property:  1t 3: Sign Below   | ave indicated my intention about any property of<br>expired lease. | ☐ Yes                      |  |
| s/Jennifer Louise Kvamme  | <b>×</b>   |                            |  |
| Signature of Debtor 1   | Signature of Debtor 2  |                            |  |
| Date 02/19/2018   | Date   |                            |  |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 54 of 66

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS

| In               | re         | Jennifer Louise K                               | (vamme                       |   |
|------------------|------------|---|------------------------------|---|
|                  |            |   |                              | Case No   |
| Debtor Chapter 7 |            |   |                              |   |
|                  |            | DISCLOS   | SURE OF COMPENSAT            | ION OF ATTORNEY FOR DEBTOR  |
| 1.               | nan<br>ban | ned debtor(s) and that<br>kruptcy, or agreed to | t compensation paid to me    | 2016(b), I certify that I am the attorney for the above within one year before the filing of the petition in rendered or to be rendered on behalf of the debtor(s) in tcy case is as follows: |
|                  | For        | · legal services, I have                        | e agreed to accept           | \$ <u>1,000.00</u>  |
|                  | Pric       | or to the filing of this                        | statement I have received    | \$ <u>1,000.00</u>  |
|                  | Bal        | ance Due  |                              | \$ <u>0.00</u>  |
| 2.               | The        | e source of the compe                           | ensation paid to me was:     |   |
|                  |            | <b>X</b> Debtor                                 | Other (specify)              |   |
| 3.               | The        | e source of compensa                            | tion to be paid to me is:    |   |
|                  |            | X Debtor  | Other (specify)              |   |
| 4.               |            | X I have not agree<br>members and associ        | ed to share the above-disclo | sed compensation with any other person unless they are  |
|                  |            | members or associat                             |                              | compensation with a other person or persons who are not of the agreement, together with a list of the names of the l.   |
| 5.               |            | return for the above-d<br>e, including:         | isclosed fee, I have agreed  | to render legal service for all aspects of the bankruptcy   |
|                  | a.         | Analysis of the debt file a petition in ban     |                              | d rendering advice to the debtor in determining whether to  |
|                  | b.         | Preparation and filir                           | ng of any petition, schedule | s, statements of affairs and plan which may be required;  |
|                  | c.         | Representation of the hearings thereof;         | e debtor at the meeting of   | creditors and confirmation hearing, and any adjourned   |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 55 of 66 B2030 (Form 2030) (12/15)

- d. Representation-of-the-debtor-in-adversary-proceedings and other-contested-bankruptey-matters;-
- e. [Other provisions as needed]

None

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Objection to Motion to Lift Automatic Stay, Dispute Over Exemptions or Preferential Payments, Objection to Discharge or Motion to Require Chapter 13, Setting Aside Liens against personal property or real estate, Minimum additional charge if forms are not completed by client, Audit charges, Amendment to Petition after filing, Represent debtor in Adversay proceedings.

## CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 19, 2018

s/Linda A. Giesen

Date

Signature of Attorney

**Dixon & Giesen Law Offices** 

Name of law firm

# UNITED STATES BANKRUPTCY COURT Northern District of Illinois

#### STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. § 341

### INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Bankruptcy Administrator has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of -

- the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts in bankruptcy;
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This statement contains only general principles of law and is not a substitute for legal advice. If you have any questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

#### WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed in your bankruptcy schedules. A discharge is a court order that says that you do not have to repay your debts, but there are a number of exceptions. Debts which usually may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; debts which were not listed in your bankruptcy schedules; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to repay debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

### WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying debts that were not listed on your bankruptcy schedules or that you incurred after you filed bankruptcy. There are exceptions to this general statement. See your lawyer if you have questions.

## WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your bankruptcy petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court sixty (60) days after the first meeting of creditors.

Reaffirmation agreements are strictly voluntary. They are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt. This is particularly true when property you wish to retain is collateral for a debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues an order of discharge or within sixty (60) days after you filed the reaffirmation agreement with the court, whichever is later.

If you reaffirm a debt and fail to make the payments as required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any deficiency. In addition, creditors may seek other remedies, such as garnishment of wages.

### OTHER BANKRUPTCY OPTIONS

## Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 57 of 66

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtors' farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtors must pay the chapter 13 trustee the amount set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,000,000 (\$250,000 in unsecured debts and \$750,000 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

By signing below, I/we acknowledge that I/we have received a copy of this document, and that I/we have had an opportunity to discuss the information in this document with an attorney of my/our choice.

| Date | February 19, 2018 | s/Jennifer Louise Kvamme |
|------|-------------------|--------------------------|
|      |                   | Jennifer Louise Kvamme   |
|      |                   |                          |
|      |                   |                          |
|      |                   |                          |
|      |                   |                          |
|      |                   |                          |

### ATTORNEY CLIENT AGREEMENT

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing a Chapter 7 case, with the debtor(s), and answer the debtors(s) questions.
- 2. Personally explain to the debtor(s) that the attorney is being engaged to represent the debtor(s) on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor(s) and sign the completed petition, plan, statements, schedules, as well as all amendments thereto, whether filed with the petition or later.
- 4. Timely prepare and file the debtor(s) petition, plan, statements and schedules.
- 5. Provide knowledgeable legal representation for the debtor(s) at the meeting of creditors.
- 6. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor(s) in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor(s).
- 7. Be available to respond to the debtor(s) questions throughout the case.

## THE DEBTOR(S) AGREES TO:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with a picture identification card and will also bring to the meeting a social security card. The debtor(s) must be present in time for check-in and when the case is called for the actual examination.
- 2. Notify the attorney of any change in the debtor(s) address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor(s) loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or inheritance).
- 5. Notify the attorney if the debtor(s) is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor(s) is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 7. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 8. Supply the attorney with copies of all tax returns filed while the case is pending.

## ALLOWANCE AND PAYMENT OF ATTORNEY FEES

1. Any attorney retained to represent a debtor(s) in a Chapter 7 case is responsible for representing the debtor(s) on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of

\$1,000.00 Preparation of Petition and Basic Service \$335.00 Filing Fee (Charged by Bankruptcy Court) \$1,335.00

## POSSIBLE ADDITIONAL CHARGES ARE AS FOLLOWS:

| \$100 | Minimum additional charge if forms are not completed by client                         |
|-------|--|
| \$100 | Audit charge   |
| \$75  | Extraordinary Number of Creditors (more than 99)                                       |
| \$100 | Amendment to Petition After Filing (plus \$26 filing fee)                              |
|       | Stop Wage Garnishment-court proceedings on hourly basis                                |
| \$50  | Reaffirmation Agreements or Redemption Agreements (if file more than two)              |
| \$100 | Dispute over value of security   |
|       | Objection to Motion to Lift Automatic Stay (hourly rate of attorney)                   |
|       | Dispute over Exemptions or Preferential Payments (hourly rate of attorney)             |
|       | Objection to Discharge or Motion to Require Chapter 13 (hourly rate of attorney)       |
|       | Setting Aside Liens against personal property or real estate (hourly rate of attorney) |
|       | Represent debtor in an adversary proceeding (hourly rate of attorney)                  |

DATE: 2/19/18

Sanifard avisa Kyamma

Attorney for Debtor: Sund All

Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Case 18-80306 Doc 1 Page 60 of 66 Document

Debtor 1

Jennifer Louise Kvamme

| bbtor 1 Jennifer Louise Kvamme Case number (if known) |  |   |   |  |  |
|---|--|---|---|--|--|
| First Name Middle Nam                                 | e Last Name  |   |   |  |  |
|   |  |   |   |  |  |
| Part 6: Answer These Ques                             | stions for Reporting Purposes  |   |   |  |  |
|   |  |   |   |  |  |
| 16. What kind of debts do you have?                   |  | consumer debts? Consumer debts are imarily for a personal, family, or househol  |   |  |  |
| •   | <ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>  |   |   |  |  |
|   |  | business debts? Business debts are dement or through the operation of the busin |   |  |  |
|   | <ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>  |   |   |  |  |
|   | 16c. State the type of debts you ow  | e that are not consumer debts or business                                       | s debts   |  |  |
|   | your chairs and type or double you are   |   |   |  |  |
| A   |  |   |   |  |  |
| 17. Are you filing under Chapter 7?                   | ☐ No. I am not filing under Chapte   |   |   |  |  |
| Do you estimate that after<br>any exempt property is  | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?   |   |   |  |  |
| excluded and<br>administrative expenses               | ☑ No   |   |   |  |  |
| are paid that funds will be                           | ☐ Yes  |   |   |  |  |
| available for distribution to unsecured creditors?    |  |   |   |  |  |
| 18. How many creditors do                             | ▲ 1-49   | 1,000-5,000   | <b>2</b> 5,001-50,000   |  |  |
| you estimate that you<br>owe?                         | 50-99  | 5,001-10,000  | 50,001-100,000  |  |  |
| owe:  | ☐ 100-199<br>☐ 200-999   | 10,001-25,000   | ☐ More than 100,000   |  |  |
| 19. How much do you                                   | \$0-\$50,000   | \$1,000,001-\$10 million  | \$500,000,001-\$1 billion                                     |  |  |
| estimate your assets to<br>be worth?                  |  | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million                        | \$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion |  |  |
|   | \$500,001-\$300,000  | □ \$100,000,001-\$100 million   | ☐ More than \$50 billion                                      |  |  |
| 20. How much do you                                   | ☐ \$0-\$50,000   | □ \$1,000,001-\$10 million  | □ \$500,000,001-\$1 billion                                   |  |  |
| estimate your liabilities to be?                      | \$50,001-\$100,000   | ☐ \$10,000,001-\$50 million   | □ \$1,000,000,001-\$10 billion                                |  |  |
| to be:  | <ul><li> ■ \$100,001-\$500,000 </li><li> ■ \$500,001-\$1 million </li></ul>  | □ \$50,000,001-\$100 million □ \$100.000,001-\$500 million                      | □ \$10,000,000,001-\$50 billion □ More than \$50 billion      |  |  |
| Part 7: Sign Below                                    | <b>—</b> \$600,001 \$1 mmon  | _ \$100,000,001 \$000 111111011   | — Mere than \$60 simon  |  |  |
| For you   | THE STATE OF THE S | declare under penalty of perjury that the i                                     | nformation provided is true and                               |  |  |
| ,   | correct.   | er 7, I am aware that I may proceed, if elig                                    | nible under Chapter 7 11 12 or 13                             |  |  |
|   |  | derstand the relief available under each c                                      |   |  |  |
|   | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).   |   |   |  |  |
|   | I request relief in accordance with the  | ne chapter of title 11, United States Code,                                     | specified in this petition.                                   |  |  |
|   | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  |   |   |  |  |
|   | * Jon's LK   | ×   |   |  |  |
|   | Signature of Debtor 1  | Signature of I  | Debtor 2  |  |  |
|   | Executed on  |   |   |  |  |

MM / DD / YYYY

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 61 of 66

| Debtor 1 Jennifer Louise Kvan   |   |   |  |
|---|---|---|--|
|   |   |   |  |
| For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of available under each chapter for which the pethe notice required by 11 U.S.C. § 342(b) and knowledge after an inquiry that the information | itle 11, United States Code, and<br>erson is eligible. I also certify th<br>I, in a case in which § 707(b)(4) | d have explained the relief<br>at I have delivered to the debtor(s)<br>(D) applies, certify that I have no |
|   | Linda A. Giesen Printed name  Dixon & Giesen Law Offices Firm name  121 East First Street Number Street   |   |  |
|   | Dixon<br>City   | IL<br>State   | 61021<br>ZIP Code  |
|   | Contact phone (815) 284-2288  | Email address   | lag@hsdixonlaw.com   |
|   | 56636   | IL State  |  |
|   | Bar number  | State   |  |
|   |   |   |  |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 62 of 66

| Debtor 1                                  | Jennifer Louise Kvamme |             |                      |  |
|---|------------------------|-------------|----------------------|--|
|   | First Name             | Middle Name | Last Name            |  |
| Debtor 2                                  |                        |             |                      |  |
| (Spouse, if filing                        | ) First Name           | Middle Name | Last Name            |  |
| United States Bankruptcy Court for the: _ |                        | Northern    | District Of Illinois |  |

☐ Check if this is an amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| d you pay or agree to pay someone who   | is NOT an attorney to help you fill out bankruptcy forms?          |
|---|--|
| l No  |  |
| Yes. Name of person   | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and   |
|   | Signature (Official Form 119).                                     |
|   |  |
| nder penalty of perjury, I declare that I ha<br>at they are true and correct. | ave read the summary and schedules filed with this declaration and |
|   | ave read the summary and schedules filed with this declaration and |
|   | ave read the summary and schedules filed with this declaration and |
|   |  |

# Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 63 of 66

| First I   |  |   | er (if known)   |
|---|--|---|---|
|   | Name Middle Name La  | ast Name  |   |
|   |  | Describe the nature of the business   | Employer Identification number  Do not include Social Security number or ITIN.                                      |
| Business  | s Name   | _   | EIN:  |
| Number  | Street   | Name of accountant or bookkeeper  | Dates business existed  |
| -   |  | -   | From To   |
| City  | State ZIP Code   |   |   |
|   |  | uptcy, did you give a financial statement to anyone a   | bout your business? Include all financial   |
| istitutions,<br>☑ No  | , creditors, or other parties.   |   |   |
| Yes. Fill   | in the details below.  |   |   |
|   |  | Date issued   |   |
| Name  |  | MM / DD / YYYY  |   |
| Number  | Street   | _   |   |
|   |  | _   |   |
|   | State ZIP Code   | _   |   |
| City  |  |   |   |
| City  | State ZIP Code   |   |   |
| City  | State ZIP Code   |   |   |
| City  | State ZIP Code   |   |   |
|   | gn Below   | ,   |   |
| I have read answers a in connect  | gn Below  d the answers on this Statem   | ent of Financial Affairs and any attachments, and I of and that making a false statement, concealing properan result in fines up to \$250,000, or imprisonment for  | erty, or obtaining money or property by fraud   |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statemare true and correct. I understation with a bankruptcy case of §§ 152, 1341, 1519, and 3571.   | and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for the state of t | erty, or obtaining money or property by frauc   |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statem are true and correct. I understation with a bankruptcy case of §§ 152, 1341, 1519, and 3571.  | and that making a false statement, concealing prop<br>an result in fines up to \$250,000, or imprisonment fo  | erty, or obtaining money or property by frauc   |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statemare true and correct. I understation with a bankruptcy case of §§ 152, 1341, 1519, and 3571.   | and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for the state of t | erty, or obtaining money or property by fraud   |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statem are true and correct. I understation with a bankruptcy case of §§ 152, 1341, 1519, and 3571.  The of Debtor 1   | and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for the state of Debtor 2  | erty, or obtaining money or property by frauc<br>or up to 20 years, or both.  |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statem are true and correct. I understation with a bankruptcy case of §§ 152, 1341, 1519, and 3571.  The of Debtor 1   | and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for the state of Debtor 2  Date  | erty, or obtaining money or property by frauc<br>or up to 20 years, or both.  |
| I have read answers a in connect 18 U.S.C.  | gn Below  d the answers on this Statemare true and correct. I understation with a bankruptcy case of \$\frac{3}{5}\$ 152, 1341, 1519, and 3571.  The of Debtor 1  The of Debtor 1  The of Debtor 1  The of Debtor 1 and 3571.  | and that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for the state of Debtor 2  Date  | erty, or obtaining money or property by fraud<br>or up to 20 years, or both.  g for Bankruptcy (Official Form 107)? |
| I have read answers a in connect 18 U.S.C.  Signatur  Date  Did you at  No Yes  Did you part  No No | gn Below  d the answers on this Statem are true and correct. I understation with a bankruptcy case of \$\frac{8}{3}\$ 152, 1341, 1519, and 3571.  The state of Debtor 1  The state of Debtor 1 are of Debtor 1 are of Debtor 1 are of Debtor 2 are of Debtor 3 are of Debtor 3 are of Debtor 3 are of Debtor 3 are of Debtor 4 are of Debtor 4 are of Debtor 5 are of Debtor 5 are of Debtor 6 are of Debtor 6 are of Debtor 7 are of Debtor 7 are of Debtor 7 are of Debtor 8 are of Debtor 9 a | sand that making a false statement, concealing proper an result in fines up to \$250,000, or imprisonment for signature of Debtor 2  Date  Tr Statement of Financial Affairs for Individuals Filing   | erty, or obtaining money or property by fraudor up to 20 years, or both.  g for Bankruptcy (Official Form 107)?     |

Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Page 64 of 66 Document

Your name

Jennifer Louise Kvamme

Middle Name Last Name

Case number (If known)\_

| any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet led. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |   |  |  |  |
|---|---|--|--|--|
| Describe your unexpired personal property leases  | Will the lease be assumed?                                      |  |  |  |
| essor's name:   | ☐ No  |  |  |  |
| escription of leased roperty:   | ☐ Yes   |  |  |  |
| essor's name:   | □ No  |  |  |  |
|   | Yes   |  |  |  |
| escription of leased roperty:   |   |  |  |  |
|   |   |  |  |  |
| essor's name:   | □ No  |  |  |  |
| escription of leased roperty:   | Yes   |  |  |  |
| essor's name:   | □ No  |  |  |  |
| Description of leased roperty:  | ☐ Yes   |  |  |  |
| essor's name:   | □ No  |  |  |  |
| Description of leased roperty:  | ☐ Yes   |  |  |  |
| essor's name:   | □ No  |  |  |  |
| Description of leased roperty:  | ☐ Yes   |  |  |  |
| essor's name:   | □ No  |  |  |  |
| Description of leased property:   | ☐ Yes   |  |  |  |
| Sign Below  Inder penalty of perjury, I declare that I have indicated my intented aronal property that is subject to an unexpired lease.  | ion about any property of my estate that secures a debt and any |  |  |  |
| Script property that is subject to an unexpired lease.  |   |  |  |  |
|   | of Debtor 2   |  |  |  |

# UNITED STATES BANKRUPTCY COURT Northern District of Illinois

#### STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. § 341

#### INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Bankruptcy Administrator has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of -

- the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts in bankruptcy;
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This statement contains only general principles of law and is not a substitute for legal advice. If you have any questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

#### WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed in your bankruptcy schedules. A discharge is a court order that says that you do not have to repay your debts, but there are a number of exceptions. Debts which usually may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; debts which were not listed in your bankruptcy schedules; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to repay debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

#### WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying debts that were not listed on your bankruptcy schedules or that you incurred after you filed bankruptcy. There are exceptions to this general statement. See your lawyer if you have questions.

#### WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your bankruptcy petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court sixty (60) days after the first meeting of creditors.

Reaffirmation agreements are strictly voluntary. They are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt. This is particularly true when property you wish to retain is collateral for a debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues an order of discharge or within sixty (60) days after you filed the reaffirmation agreement with the court, whichever is later.

If you reaffirm a debt and fail to make the payments as required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any deficiency. In addition, creditors may seek other remedies, such as garnishment of wages.

## OTHER BANKRUPTCY OPTIONS

# Case 18-80306 Doc 1 Filed 02/19/18 Entered 02/19/18 11:24:32 Desc Main Document Page 66 of 66

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtors' farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtors must pay the chapter 13 trustee the amount set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,000,000 (\$250,000 in unsecured debts and \$750,000 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

By signing below, I/we acknowledge that I/we have received a copy of this document, and that I/we have had an opportunity to discuss the information in this document with an attorney of my/our choice.

| Date | 2/19/18 | Jennifer Louise Kvamme |
|------|---------|------------------------|
|      |         |                        |
|      |         |                        |